

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01588 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. [REDACTED] Issued 7-12-88
date

Job Location 125 W WASHINGTON
address

Lot 395 ORIGINAL PLAT
sub-div or legal descrip

Issued By F
building official

Owner DONNA LEONHARDT
name tel

Address 855 HOOVER RD

Agent WEBB BROS.
builder-eng etc tel

Address RR 5 - DEFIANCE, OHIO
43512

Description of Use HOSPITAL CARRIAGE
HOOR

Residential _____
no dwelling units

Commercial _____ Industrial _____
DEMOLITION

New _____ Add'n _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 1500.00

FEES	BASE	PLUS	TOTAL
BUILDING			
ELECTRICAL			
PLUMBING			
MECHANICAL			
<input checked="" type="checkbox"/> DEMOLITION	<u>10.00</u>	<u>5.00</u>	<u>15.00</u>
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			<u>15.00</u>
LESS MIN. FEES PAID _____			
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
<u>G. B.</u>					
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION: N/A

Size: Length 30 Width 30 Stories 2 Ground Floor Area 900

Height 24' Building Volume (for demo. permit) 21600 cu. ft.

Electrical: NA
brief description

Plumbing: NA
brief description

Mechanical: NA
brief description

Sign: NA Dimensions _____ Sign Area _____
type

Additional Information: DEMOLISH HOSPITAL CARRIAGE HOOR

Date _____ Applicant Signature _____
owner-agent

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR ~~BUILDING~~ PERMIT
(Please print or type)

Demolition

The undersigned hereby makes application for construction, installation, or alteration work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 125 W. WASHINGTON Cost of project \$ 1500.⁰⁰

Owner's Name DONNA Z EDNHARDT Address _____

Contractor W.H. Bros. Telephone No. 419-393-2222

Address R#5 Napoleon, Ohio

Lot Information: (Not required for siding job)

Lot No. 345 Subdivision ORIGINAL PLAT

Zoning District _____ Lot Size _____ ft. X _____ ft. Area _____ sq. ft.

Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential _____ Commercial _____ Industrial _____

New Construction _____ Addition _____ Remodel _____

Accessory Building _____ Siding _____
(Specific Type)

Brief Description of Work:-----

Size: Length 70 Width 70 No. of Stories 2

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.

3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: 21600 ~~STP~~ C.F. DEMOLITION

PERMIT NO. _____
PERMIT FEE \$ _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date July 12, 1988 Applicant's Signature W.H. Bros. - John Webb

