

P E R M I T

CITY OF NAPOLEON  
255 W. RIVERVIEW AVE  
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING  
PH (419) 592-4010  
FAX (419) 599-8393

PERMIT NO: 98367

DATE ISSUED: 10-15-98

ISSUED BY: BND

JOB LOCATION: 1146 WESTMONT AVE

EST. COST: 19000.00

LOT #:

SUBDIVISION NAME:

OWNER: PLASSMAN, SCOTT  
ADDRESS: 1146 WESTMONT AVE  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-599-7253

AGENT: GERMANN BLDRS  
ADDRESS: 970 OAKWOOD AVE  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-1806

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: R-2 LOT DIM: 85X105 AREA: 8925 FYRD: 30 SYRD: 10 RYRD: 15  
MAX HT: 45' # PKG SPACES: 2 # LOADING SP: MAX LOT COV: 35%

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: REPLMNT: ADD'N: X ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: 17 WIDTH: 14 STORIES: 1 LIVING AREA SF: 245  
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

ADDITION SUN ROOM 17.5X14

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

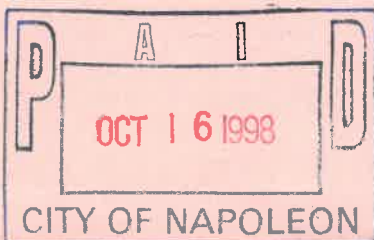
BUILDING PERMIT  
ELECTRICAL PERMIT

75.00  
12.00

TOTAL FEES DUE 87.00

10/16/98  
DATE

*[Handwritten Signature]*  
APPLICANT SIGNATURE



**APPLICATION FOR**

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FROM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. \_\_\_\_\_

PERMIT NO. \_\_\_\_\_ ISSUED \_\_\_\_\_

JOB LOCATION 1146 West Mont

LOT \_\_\_\_\_  
(Subdivision or Legal Description)

ISSUED BY \_\_\_\_\_  
(Building Official)

OWNER SCOTT PLASSMAN PHONE 599-7253

ADDRESS 1146 West Mont

AGENT BERMANN BUILDINGS PHONE 592-1806

ADDRESS \_\_\_\_\_

USE:  Residential  Commercial  Industrial  
 Other \_\_\_\_\_

WORK:  New  Addition  Replacement  Remodel

ESTIMATED COST = \$ 17,000

Building \$ \_\_\_\_\_

Electrical \$ \_\_\_\_\_

Plumbing \$ \_\_\_\_\_

Mechanical \$ \_\_\_\_\_

Demolition \$ \_\_\_\_\_

Zoning \$ \_\_\_\_\_

Sign \$ \_\_\_\_\_

Water Tap \$ \_\_\_\_\_

Sewer Tap \$ \_\_\_\_\_

Temp Water \$ \_\_\_\_\_

Temp Elec. \$ \_\_\_\_\_

Additional Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
Electric \_\_\_\_\_ Hours \_\_\_\_\_

TOTAL FEES . . . . . \$ \_\_\_\_\_  
Less Fees Paid . . . . . \$ \_\_\_\_\_  
BALANCE DUE . . . . . \$ \_\_\_\_\_

**ZONING INFORMATION**

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard
	<u>85x105</u>	<u>8925</u>	<u>30</u>	<u>16.5-51</u>	<u>39</u>
Max Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition or Appeal Required-Date	

**WORK INFORMATION**

Building: Ground Floor Area 245 sq. ft. Basement Floor Area \_\_\_\_\_ sq. ft.

Garage Floor Area \_\_\_\_\_ sq. ft. 2nd Floor Area \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.

Size: Length 17-6 Width 14<sup>4</sup> Stories 1 Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: \_\_\_\_\_