

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: 960017

DATE ISSUED: 11-21-96

ISSUED BY: BND

JOB LOCATION: 890 WESTMONT AVE

EST. COST: 3500.00

LOT #:

SUBDIVISION NAME:

OWNER: FLOWERS, LYNETTE
ADDRESS: 890 WESTMONT AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-2331

AGENT: ELLING PLBG & HTG
ADDRESS: T-487 ST HWY 108
CSZ: NAPOLEON, OH 43545
PHONE: 419-598-8991

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD:
MAX HT: # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

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

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
REMODEL BATHROOM

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
PLUMBING PERMIT		9.00

TOTAL FEES DUE 9.00

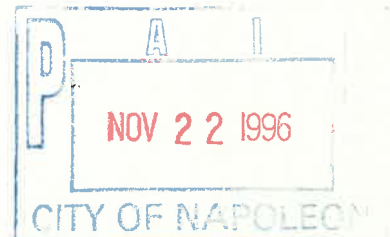
11-21-96

DATE

Earl H. Elling

APPLICANT SIGNATURE

Approved 11-21-96



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WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
RAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
REMODEL BATHROOM

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
PLUMBING PERMIT	11-22-96	9.00

COMPLETED

TOTAL FEES DUE 9.00

DATE

APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

January 22, 1997

PERMIT #: 960017

JOB LOCATION: 890 WESTMONT AVE

OWNER: FLOWERS, LYNETTE

WORK DESCRIPTION: REMODEL BATHROOM

PLUMBING: UNDGR _____ RGHIN _____ FINAL 12/3/96

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

BUILDING: SITE _____ FTG _____ FNDDT _____

STRUC _____ ROOF _____ EXT _____ VENT _____

ACCESS _____ SMKDT _____ FINAL _____ OCCP _____

MISC INSP: _____

NOTES: _____

