

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: 1154

DATE ISSUED: 05-30-02

ISSUED BY: MRD

JOB LOCATION: 1410 WOODLAWN AVE

EST. COST:

LOT #:

SUBDIVISION NAME:

OWNER: GIFFEY, NED  
ADDRESS: 1410 WOODLAWN AVE  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-1441

AGENT: BOB CORDES PLUMBING  
ADDRESS: 17-706 CO RD Q-1  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-758-3162

USE TYPE - RESIDENTIAL:

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:

WORK INFORMATION

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

WORK DESCRIPTION  
SEWER REPAIRS

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
SEWER PERMIT		0.00

TOTAL FEES DUE 0.00

May 30 2002  
DATE

Bob Cordes  
APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1154

DATE ISSUED: 05-30-2002

JOB LOCATION: 1410 WOODLAWN AVE

OWNER: GIFFEY, NED

OWNER PHONE: 419-592-1441

CONTRACTOR: BOB CORDES PLUMBING

CONTRACTOR PHONE: 419-758-3162

WORK DESCRIPTION: SEWER REPAIRS

PLUMBING:    UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          SEWER INSP \_\_\_\_\_

MECHANICAL:   UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          FURNACE REPLC \_\_\_\_\_    AIR COND \_\_\_\_\_

ELECTRICAL:   UNDGR \_\_\_\_\_    RGHIN \_\_\_\_\_    FINAL \_\_\_\_\_

          SERV UPGR \_\_\_\_\_

BUILDING:    SITE \_\_\_\_\_    FTG \_\_\_\_\_    FNDDT \_\_\_\_\_

          STRUC \_\_\_\_\_    ROOF \_\_\_\_\_    EXT \_\_\_\_\_

          VENT \_\_\_\_\_    ACCES \_\_\_\_\_    EGRS \_\_\_\_\_

          SMKDT \_\_\_\_\_    FINAL \_\_\_\_\_

          ISSUE TEMP OCCUP \_\_\_\_\_    ISSUE OCCUP \_\_\_\_\_

STRG SHED:   SITE \_\_\_\_\_    FINAL \_\_\_\_\_

SIGN:        FTG \_\_\_\_\_    FINAL \_\_\_\_\_

FENCE:       SITE \_\_\_\_\_    FINAL \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INSPECTOR INITIALS: \_\_\_\_\_