

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: 544

DATE ISSUED: 04-12-01

ISSUED BY: BND

JOB LOCATION: 920 KENILWORTH AVE

EST. COST: 3517.00

LOT #:

SUBDIVISION NAME:

OWNER: PACEY, DONALD  
ADDRESS: 920 KENILWORTH AVE  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-3456

AGENT: WHITMER HTG & PLBG  
ADDRESS: 1290 N SHOOP AVE #60  
CSZ: WAUSEON, OH 43567  
PHONE: 419-335-7881

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:
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WORK INFORMATION

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

WORK DESCRIPTION  
FURNACE REPLACEMENT  
A/C REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT		10.00

TOTAL FEES DUE 10.00

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DATE

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APPLICANT SIGNATURE



# CITY OF NAPOLEON OHIO PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITION, REMODELING.

DATE 4/4/2001 JOB LOCATION 920 Kenilworth Napoleon, OH

LOT # \_\_\_\_\_ SUBDIVISION NAME \_\_\_\_\_

OWNER Donald Pacey PHONE 592-3456

OWNER ADDRESS 920 Kenilworth CITY Napoleon ZIP 43545

CONTRACTOR Whitmer Htg. & Plbg. Co. PHONE 419-335-7881

CONTRACTOR ADDRESS 1290 N. Shoop Ave. #60 CITY Wauseon ZIP 43567  
P.O. Box 149

CONTRACTOR FAX # 419-335-9931 CELL PHONE (Opt.) \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: Heating & Air Conditioning

ESTIMATED COST OF WORK TO BE PERFORMED: \$3517.84

### WORK INFORMATION

BUILDING: Basement Floor Area \_\_\_\_\_ Sq. Ft. 1st Story Living Area \_\_\_\_\_ Sq. Ft.  
2nd Floor Living Area \_\_\_\_\_ Sq. Ft. Garage Floor Area \_\_\_\_\_ Sq. Ft.

BUILDING SIZE: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_ DEMO VOL \_\_\_\_\_

Masonry Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Electrical Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

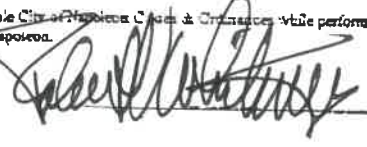
Heating Contractor Whitmer Htg. & Plbg. Co. Phone 419-335-7881 Fax 419-335-9931  
Address 1290 N. Shoop Ave. #60, City Wauseon, St OH Zip 43567  
P.O. Box 149

Insulation Contractor \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District \_\_\_\_\_ Lot Dimensions \_\_\_\_\_  
Lot Area \_\_\_\_\_ FRSB \_\_\_\_\_ SYSB \_\_\_\_\_ RYSB \_\_\_\_\_ Max Ht \_\_\_\_\_ ft Max Cov \_\_\_\_\_ %

I by signing below agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that all work for which a permit is issued is required to be approved by the building inspector of the City of Napoleon.



Date 4/4/2001