

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

MIT NO: 1144

DATE ISSUED: 05-21-02

ISSUED BY: BND

JOB LOCATION: 920 LYNNE AVE

EST. COST: 736.00

LOT #:

SUBDIVISION NAME:

OWNER: BRUBAKER, ROBERT
ADDRESS: 920 LYNNE AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-3480

AGENT: SELF
ADDRESS:
CSZ:
PHONE:

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

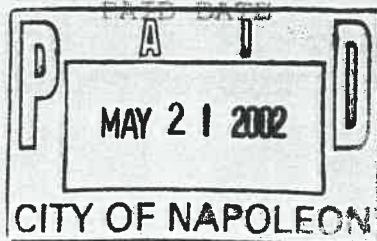
STORAGE BARN - NO PLAN
8X12 SIDE PLAN

FEE DESCRIPTION

BUILDING PERMIT

FEE AMOUNT DUE

3.00



TOTAL FEES DUE

3.00

X 5-22-2002

DATE

X Bob Brubaker

APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1144

DATE ISSUED: 05-21-2002

JOB LOCATION: 920 LYNNE AVE

OWNER: BRUBAKER, ROBERT

OWNER PHONE: 419-592-3480

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: STORAGE BARN

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: _____

