

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: 720

DATE ISSUED: 07-26-01

ISSUED BY: BND

JOB LOCATION: 320 NORTHCREST DR

EST. COST: 5000.00

LOT #:

SUBDIVISION NAME:

OWNER: ROHRS, ERIC
ADDRESS: PO BOX 124
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-6436

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: X ADD'N: ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION
DRIVE REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		0.00

TOTAL FEES DUE 0.00

7/26/01

DATE


APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 720

DATE ISSUED: 07-26-2001

JOB LOCATION: 320 NORTHCREST DR

OWNER: ROHRS, ERIC

OWNER PHONE: 419-592-6436

CONTRACTOR: SELF

CONTRACTOR PHONE:

WORK DESCRIPTION: DRIVE REPLACEMENT

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: Type 3 carb inspection

NOTES: The forms were 3/4" plywood some crookedness
in back form, unable to correct. IT is
still acceptable.

INSPECTOR INITIALS: R.L.M.