

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: 83

DATE ISSUED: 04-20-00

ISSUED BY: ACH

JOB LOCATION: 1116 STEVENSON ST

EST. COST: 3500.00

LOT #:

SUBDIVISION NAME:

OWNER: MICHEAL, LARRY
ADDRESS: 1116 STEVENSON ST
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-1531

AGENT: ELLERBROCK HTG & A/C
ADDRESS: 13055 DORONEY RD
CSZ: DEFIANCE, OH 43512
PHONE: 419-782-1834

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

FURNACE REPLACEMENT
WATER TO AIR CONV

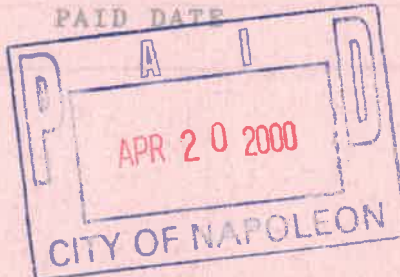
FEE DESCRIPTION

MECHANICAL PERMIT

PAID DATE

FEE AMOUNT DUE

18.00



TOTAL FEES DUE

18.00

DATE

APPLICANT SIGNATURE

CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE 4-20-00 JOB LOCATION 11116 Stevenson

LOT # _____ SUBDIVISION NAME _____

OWNER Larry Michael PHONE (419) 599-1531

OWNER ADDRESS 11116 Stevenson CITY Napoleon OH ZIP 43545

CONTRACTOR Ellerbrock Heating + Air PHONE _____

CONTRACTOR ADDRESS 17055 Dohoney Rd. CITY Defiance OH ZIP 43512

CONTRACTOR FAX # (419) 782-7919 CELL PHONE (Opt.) _____

DESCRIPTION OF WORK TO BE PERFORMED: installation of furnace + duct work

ESTIMATED COST OF WORK TO BE PERFORMED: \$3500.00 (\$18.00 fw)

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 Ellerbrock Heating + Air 75000 BTU Forced Air 80% AFUE DownFlow
Address 17055 Dohoney Rd City Defiance St OH Zip 43512

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.

Applicant Signature Larry Ellerbrock Date 4-20-2000