

APPLICATION FOR
RESIDENTIAL, BUILDING, ELECTRICAL, PLUMBING, AND MECHANICAL PERMITS AND DEMOLITION PERMIT
FROM THE CITY OF NAPOLEON, OHIO BUILDING DEPARTMENT
255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. _____

PERMIT NO. 2671 ISSUED 6-12-97 [] BUILDING \$ _____ \$ _____ \$ _____

JOB LOCATION 515 Appian [X] ELECTRICAL \$ 15.00 \$ _____ \$ 15.00

LOT _____ (Subdivision or Legal Description) [] PLUMBING \$ _____ \$ _____ \$ _____

ISSUED BY BOD (Building Official) [] MECHANICAL \$ _____ \$ _____ \$ _____

OWNER Kenneth Colm PHONE 513-747-3156 [] DEMOLITION \$ _____ \$ _____ \$ _____

ADDRESS 9827 Twp. Rd 16 [] ZONING \$ _____ \$ _____ \$ _____

AGENT Portals Electric PHONE 599-2992 [] SIGN \$ _____ \$ _____ \$ _____

ADDRESS 13-414 Co. Rd. S [] WATER TAP \$ _____ \$ _____ \$ _____

USE - RESIDENTIAL _____ OTHER _____ [] SEWER TAP \$ _____ \$ _____ \$ _____

COMMERCIAL _____ INDUSTRIAL _____ NEW _____ ADD'N _____ [] TEMP WATER \$ _____ \$ _____ \$ _____

REPLACEMENT _____ REMODEL _____ MIXED OCCUPANCY _____ [] TEMP ELEC \$ _____ \$ _____ \$ _____

ESTIMATED COST - \$ 400.00

Additional Plan Review - Structure Electric _____ Hours _____

TOTAL FEES \$ 15.00

Less Fees Paid (Date) _____ \$ _____

BALANCE DUE \$ 15.00

ZONING INFORMATION

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard
Max. Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition Or Appeal Required - Date	

WORK INFORMATION

BUILDING - GARAGE FLOOR AREA _____ SQ. FT. - BASEMENT FLOOR AREA _____ SQ. FT. - 2ND FLOOR AREA _____ SQ. FT.

SIZE - LENGTH _____ - WIDTH _____ - STORIES _____ - GROUND FLOOR AREA _____ SQ. FT.

HEIGHT _____ - BUILDING VOLUME (FOR DEMOLITION PERMIT) _____ CUBIC FEET

DESCRIPTION OF WORK: 100 Amp Service Change

ELECTRICAL: Electrical Contractor _____ Phone _____

Address _____ Estimated Cost: \$ 400

Type of Work: New _____ Service Change Rewiring _____ Add'l. Wiring _____ Temp. Electric Required: Yes _____ No _____

Size of Service 100 Underground _____ Overhead Number of New Circuits _____

Description of Work: _____

PLUMBING: Plumbing Contractor _____ Phone _____

Address _____ Estimated Cost: \$ _____

Water Tap Required: Yes _____ No _____ Size _____ Type of Pipe _____ Water Dist. Pipe _____

Sanitary Sewer Tap Required: Yes _____ No _____ Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____

St. Sewer Tap Req.: Yes _____ No _____ Size _____ Type of Pipe _____ Street to be Opened: Yes _____ No _____

Main Building Drain Size: _____ Main Vent Pipe Size: _____

List Number of PLUMBING Fixtures below:

Water Closets _____ Bathtubs _____ Showers _____ Lavatories _____ Kitchen Sinks _____ Disposal _____ Dishwasher _____

Clothes Washer _____ Floor Drains _____ Other (Fixtures/Type): _____

Description of Work: _____

MECHANICAL: Mechanical Contractor _____ Phone _____

Address _____ Estimated Cost: \$ _____

Heating System: Forced Air _____ Gravity _____ Hot Water _____ Steam _____ Unit Heaters _____ Radiant _____ Baseboard _____

Type of Fuel: Electric _____ Natural Gas _____ Propane _____ Wood _____ Coal _____ Solar _____ Geothermal _____ Other _____

Number of Heat Zones: _____ Hot Water: (One Pipe _____ Two Pipe _____ Series Loop _____)

Electric Heat: (No. of Circuits _____) No. of Furnaces _____ No. of Hot Air Runs _____

No. of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____

Location of Heating Units: Crawl Space _____ Floor Level _____ Attic _____ Suspended _____ Roof _____ Outside _____

Description of Work: _____

DRAWINGS REQUIRED: All Applications must be accompanied by two (2) complete set of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall be DRAWN TO SCALE, show all existing structure on the Site Plans also, show Electric Panel and Furnace Locations.

READ AND SIGN BELOW: The undersigned hereby makes application for a Permit for all work described herein, and agrees to complete the work in strict accordance with all applicable provisions of the current edition of the C.A.B.O. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Department Rules and Regulations, Standard Specifications and other Pertinent Sections of the Napoleon Code of Ordinances.

Dated: _____ Signature of Applicant _____

ELECTRICAL: Electrical Contractor _____ Phone _____
Address _____ Estimated Cost: \$ 700
Type of Work: New _____ Service Change X Rewiring _____ Add'l. Wiring _____ Temp. Electric Required: Yes _____ No _____
Size of Service 100 Underground _____ Overhead X Number of New Circuits _____
Description of Work: _____

PLUMBING: Plumbing Contractor _____ Phone _____
Address _____ Estimated Cost: \$ _____
Water Tap Required: Yes _____ No _____ Size _____ Type of Pipe _____ Water Dist. Pipe _____
Sanitary Sewer Tap Required: Yes _____ No _____ Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____
St. Sewer Tap Req.: Yes _____ No _____ Size _____ Type of Pipe _____ Street to be Opened: Yes _____ No _____
Main Building Drain Size: _____ Main Vent Pipe Size: _____

List Number of PLUMBING Fixtures below:
Water Closets _____ Bathtubs _____ Showers _____ Lavatories _____ Kitchen Sinks _____ Disposal _____ Dishwasher _____
Clothes Washer _____ Floor Drains _____ Other (Fixtures/Type): _____

Description of Work: _____

MECHANICAL: Mechanical Contractor _____ Phone _____
Address _____ Estimated Cost: \$ _____
Heating System: Forced Air _____ Gravity _____ Hot Water _____ Steam _____ Unit Heaters _____ Radiant _____ Baseboard _____
Type of Fuel: Electric _____ Natural Gas _____ Propane _____ Wood _____ Coal _____ Solar _____ Geothermal _____ Other _____
Number of Heat Zones: _____ Hot Water: (One Pipe _____ Two Pipe _____ Series Loop _____)
Electric Heat: (No. of Circuits _____) No. of Furnaces _____ No. of Hot Air Runs _____
No. of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____
Location of Heating Units: Crawl Space _____ Floor Level _____ Attic _____ Suspended _____ Roof _____ Outside _____
Description of Work: _____

DRAWINGS REQUIRED: All Applications must be accompanied by two (2) complete set of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall be DRAWN TO SCALE, show all existing structure on the Site Plans also, show Electric Panel and Furnace Locations.

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Dated: _____ Signature of Applicant _____

PERMIT
 CITY OF NAPOLEON, OHIO - BUILDING DEPARTMENT
 255 West Riverview Avenue, Napoleon, Ohio 43545 - (419) 592-4010

Permit No. 2671 Issued 6-12-92
 Job Location 515 Appian
 Lot _____
 Issued by Brent N. Damman
 Owner Kenneth Coleman 513-747-3156
9827 Twp. Rd. 16
 Address N. Lewisburg, Ohio
 Agent Bartels Electric 599-2992
 Address 13-414 Co. Rd. S. Napoleon,
Ohio
 Use Type - Residential xx
 Other - Describe _____
 No. Dwelling Units 1
 New _____ Replacement _____
 Add'n. _____ Alter x Remodel _____
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 400.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Electrical	\$ <u>15.00</u>	\$ _____	\$ <u>15.00</u>
<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sew. Insp.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp. Water	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp. Elec.	\$ _____	\$ _____	\$ _____
TOTAL FEES.....			\$ <u>15.00</u>
LESS FEES PAID...6-12-92....			\$ <u>15.00</u>
BALANCE DUE.....			\$ 15.00 <u>0.00</u>

ZONING INFORMATION

district	lot dimensions		area	front yd	side yd	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr	

WORK INFORMATION

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for Demo. Permit) _____
 Electrical: 100 amp service change.
 Plumbing: _____
 Mechanical: _____
 Additional Information: _____

Date 6-12-92 Applicant Signature John D. Swearingin

PAID
JUN 12 1992
 CITY OF NAPOLEON

INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
PLUMBING	Building Drains			Drainage, Waste & Vent Piping			Indirect Waste			Drainage, Waste & Vent Piping		
	Water Piping									Backflow Prevention		
	Building Sewer			Water Piping			Condensate Lines			Water Heater		
	Sewer Connection									FINAL APPROVAL		
MECHANICAL	Refrigerant Piping			Refrigerant Piping			Chimney(s)			Grease Exhaust System		
				Duct Furnace(s)			Fire Dampers			Air Cond. Unit(s)		
	Ducts/ Plenums			Ducts/ Plenums			<input type="checkbox"/> Radiant Htr(s) <input type="checkbox"/> Unit Htr(s)			Refrigeration Equipment		
				Duct Insulation			Pool Heater			Furnace(s)		
				Combustion Products Vents			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.			FINAL APPROVAL		
ELECTRICAL	Conduits & or Cable			Conduits/ Cable			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			Temp Service Temp Lighting		
	Grounding & or Bonding			Rough Wiring			<input type="checkbox"/> Generator(s) <input type="checkbox"/> Motors			Fixtures Lampholders		
	Floor Ducts Raceways			Service Panel Switchboard		6/18/80	<input type="checkbox"/> Water Htr <input type="checkbox"/> Welder			Signs		
	Service Conduit			Busways Ducts			<input type="checkbox"/> Heaters <input type="checkbox"/> Heat Cable			Electric Mtr. Clearance		
	Temporary Power Pole			Subpanels			<input type="checkbox"/> Duct Htr(s) <input type="checkbox"/> Furnace(s)			FINAL APPROVAL		
BUILDING	Location, Set-backs, Esmt(s)			Exterior Wall Construction			Roof Covering Roof Drainage			Smoke Detector		
	Excavation						Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls			Columns & Supports			Fireplace Chimney					
	Sub-soil Drain			Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access					
	Piles			Floor System(s)						FINAL APPROVAL BLDG. DEPT.		
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					
	PAID 7:50 SEPT 15 1980											