PERMIT

CITY OF NAPOLEON 255 W. RIVERVIEW AVE NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING PH (419) 592-4010 FAX (419) 599-8393

PERMIT NO: 681 DATE ISSUED: 07-09-01 ISSUED BY: BND

JOB LOCATION: 608 AVON PL

EST. COST: 200.00

LOT #:

SUBDIVISION NAME:

OWNER: CHADWICK, DAN

AGENT: SELF

ADDRESS: 1212 CO. RD. EF CSZ: SWANTON, OH 43558

ADDRESS: CSZ:

PHONE: 419-825-5800

PHONE:

USE TYPE - RESIDENTIAL:

OTHER:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD: MAX HT: # PKG SPACES: # LOADING SP: MAX LOT GOV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: REPLANT: ADD'N: X ALTER: REMODEL:

WORK INFORMATION

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

WORK DESCRIPTION

SEPARATE SINGLE WATER SERV INTO 2 SERV

FEE DESCRIPTION

PAID DATE

PEE AMOUNT DUE

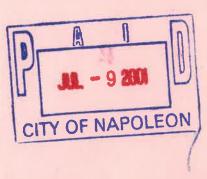
PLUMBING PERMIT

15.00

TOTAL FEES DUE 15.00

DATE

APPLICANT SIGNATURE



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WORK INFORMATION

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WORK DESCRIPTION

SEPARATE SINGLE WATER SERV INTO 2 SERV

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

WATER TAP PERMIT

9.00 15.00

7-9-01

DATE

TOTAL FEES DUE

APPLICANT SIGNATURE

CITY OF NAPOLEON

CITY OF NAPOLEON

WATER METER YOKE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" WATER METER YOKE ASSEMBLY (Please pickup at City Operations Department 1775 Industrial Drive).

ISSUED: 07-09-2001

PERMIT #: 681 ISSUED: 07-09-2001
JOB LOCATION: 608 AVON PL
OWNER: CHADWICK, DAN PHONE: 419-825-5800
ADDRESS: 1212 CO. RD. EF SWANTON, OH 43558
CONTRACTOR: SELF
ADDRESS:
PHONE:
WATER TAP SIZE 1" 1.5" 2" OTHER
WATER METER YOKE SIZE 5/8" 3/4" X 1" OTHER
NEW STRUCTURE EXISTING STRUCTURE X LAWN METER
WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING OF 1" MINIMUM SIZE.
BACKFLOW DEVICE REQUIRED YES X NO
TYPE OF BACKFLOW DEVICE REQUIRED DOUBLE CHECK VALVE
WATER METER YOKE INSTALLATION IS SUBJECT TO THE FOLLOWING CONDITIONS
1.) MUST BE LOCATED IN AN ACCESSIBLE AREA.
2.) MUST BE IN AN AREA WRICH IS NOT SUBJECT TO FREEZING TEMPERATURES.
3.) MUST BE AT LEAST 18" ABOVE FLOOR LEVEL (NO CRAWL SPACE INSTALLATIONS).
4.) MUST COMPLY WITH MINIMUM MOUNTING REQUIREMENTS (DRAWING AVAILABLE)
ISSUED BY RECEIVED BY

1-Copy to: Building Dept, Water Dept, and Utilities Dept

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 681
DATE ISSUED: 07-09-2001
JOB LOCATION: 608 AVON PL
OWNER: CHADWICK, DAN
OWNER PHONE: 419-825-5800
CONTRACTOR: SELF
CONTRACTOR PHONE:
WORK DESCRIPTION: SEPARATE SINGLE WATER SERV INTO 2 SERV
PLUMBING: UNDGR RGHIN FINAL
SEWER INSP
MECHANICAL: UNDGR RGHIN FINAL
FURNACE REPLC AIR COND
ELECTRICAL: UNDGR RGHIN FINAL
SERV UPGR
BUILDING: SITE FTG FNDT
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: