

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: 99308

DATE ISSUED: 08-31-99

ISSUED BY: BND

JOB LOCATION: 557 BECKLEE DR

EST. COST: 85000.00

LOT #: 22

SUBDIVISION NAME: VANHYNING 1ST

OWNER: BECKS CONSTRUCTION CO
ADDRESS: 11622 CO RD M
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-8307

AGENT: BECKS CONSTRUCTION C
ADDRESS: 11-622 CO RD M
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-8307

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: R-4 LOT DIM: 80X112 AREA: 9016 FYRD: 25 SYRD: 7 RYRD: 15
MAX HT: 45' # PKG SPACES: 2 # LOADING SP: MAX LOT COV: 45%

BOARD OF ZONING APPEALS:

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

WORK INFORMATION

SIZE - LGTH: 55 WIDTH: 52 STORIES: 1 LIVING AREA SF: 1500
GARAGE AREA SF: 499 HEIGHT: 16 BLDG VOL DEMO PERMIT:

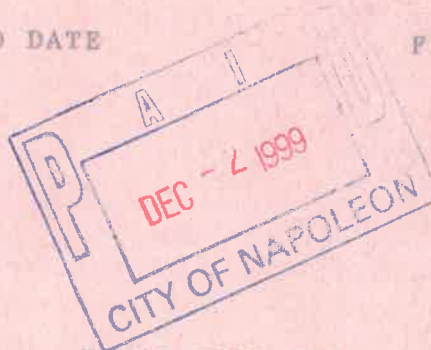
WORK DESCRIPTION
NEW HOME

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

BUILDING PERMIT	207.00
ELECTRICAL PERMIT	94.00
PLUMBING PERMIT	39.00
MECHANICAL PERMIT	24.00
WATER TAP PERMIT	650.00
SEWER PERMIT	60.00



TOTAL FEES DUE 1074.00

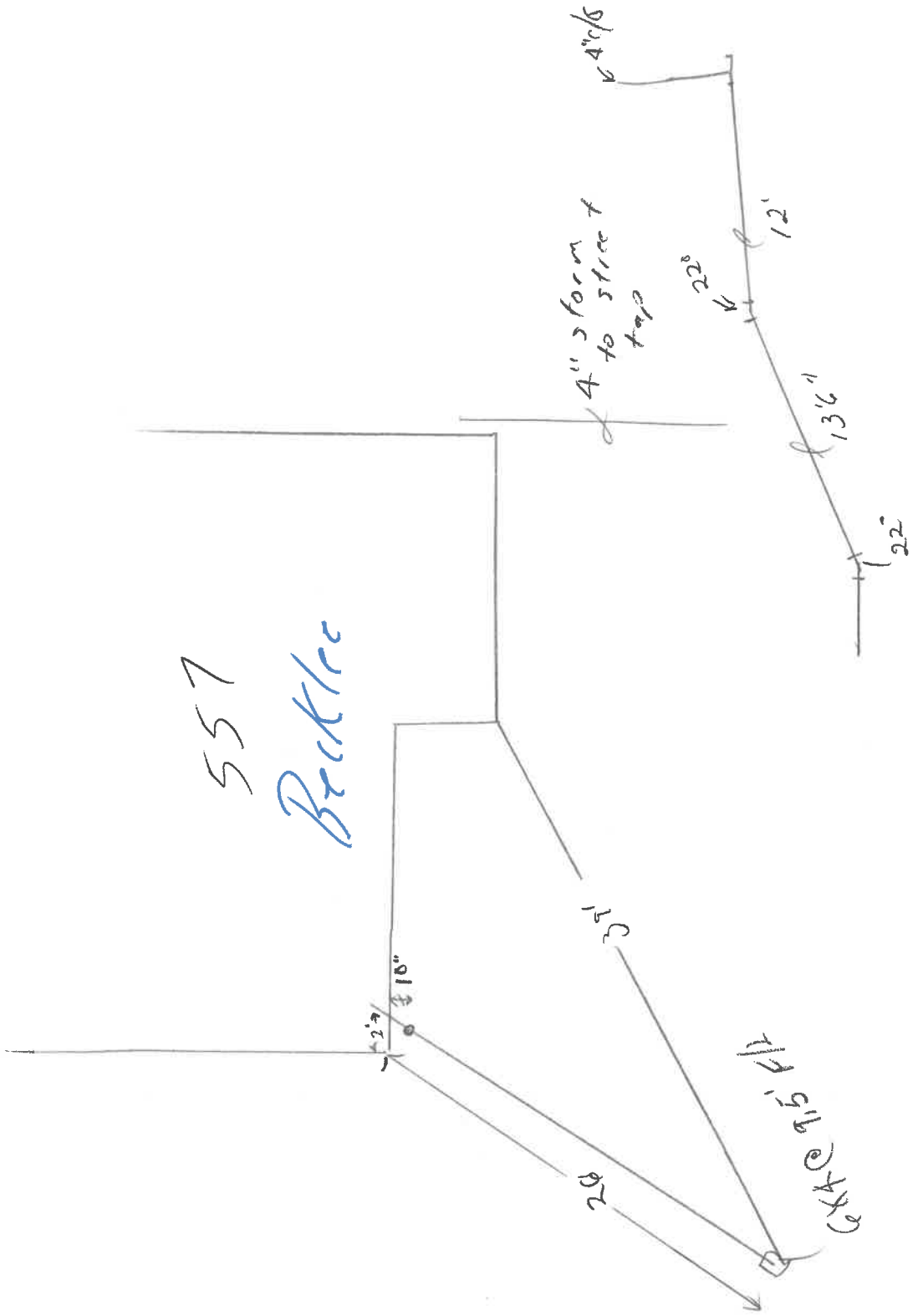
12-2-99

DATE

[Signature]

APPLICANT SIGNATURE

557
Beckler



CITY OF NAPOLEON OHIO PERMIT APPLICATION

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

DATE _____ JOB LOCATION 557 Becklee Dr
LOT # 22 SUBDIVISION NAME Van Hynig 1st
OWNER Becks Const PHONE _____
OWNER ADDRESS _____ CITY _____ ZIP _____
CONTRACTOR _____ PHONE _____
CONTRACTOR ADDRESS _____ CITY _____ ZIP _____
CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____
DESCRIPTION OF WORK TO BE PERFORMED: 4000 140m-
ESTIMATED COST OF WORK TO BE PERFORMED: 85000

WORK INFORMATION

BUILDING: Basement Floor Area _____ Sq. Ft. 1st Story Living Area 1500 Sq. Ft.
2nd Floor Living Area _____ Sq. Ft. Garage Floor Area 499 Sq. Ft.

BUILDING SIZE: Length 55 Width 52 Stories 1 Height 16 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 _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____
Insulation Contractor _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District R-4 Lot Dimensions 80x112
Lot Area 9016 FRSB 25 SYSB 7 RYSB 15 Max Ht 45 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 _____ Date _____

ELECTRICAL: Contractor _____ Phone _____

Address _____ ESTIMATED COST = \$ _____

Type of Work: New () Service Change () Rewiring () Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes () No

Size of Service 200 Underground Overhead _____ Number of New Circuits 28

Description of Work: _____

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 _____

STREET SEWER TAP REQUIRED - () Yes () No 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 = 2 Bathtubs = 1 Showers = 1 Lavatories = 2 Kitchen Sinks = 1 Disposal = 1

Clothes Washer = 1 Floor Drains = _____ Dishwasher = 1 Other _____ Total = 10

Description of Work: _____

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 (1) Pipe () Two (2) Pipes () Series Loop

ELECTRIC HEAT - Number of Circuits _____ Number of Furnaces _____ Number of Hot Air Runs 12

Number 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 sets 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, and 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.

Signature of Applicant _____ Date _____

ELECTRICAL: Contractor _____ Phone _____

Address _____ ESTIMATED COST = \$ _____

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Size of Service 200 Underground Overhead _____ Number of New Circuits 28

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Address _____ ESTIMATED COST = \$ _____

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STREET SEWER TAP REQUIRED - () Yes () No Type of Pipe _____ STREET TO BE OPENED - () Yes () No

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MECHANICAL: Contractor _____ Phone _____

Address _____ ESTIMATED COST = \$ _____

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TYPE OF FUEL - () Electric () Natural Gas () Propane () Wood () Coal () Solar () Geothermal Other _____

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Description of Work: _____

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Signature of Applicant _____ Date _____

WATER TAPPING PERMIT
 issued by
The Napoleon Water Distribution Department
 255 West Riverview Ave. Napoleon, Ohio 43545 Ph. 592-4010

Permit No. W- 0252 Issued _____ Received of _____ (\$ _____).00

(Charge for tapping permit to supply water service to) Lot No. _____ Sub Div. _____

Street No. _____ Tap Size _____ * Cost \$ _____ .00 Plumber _____

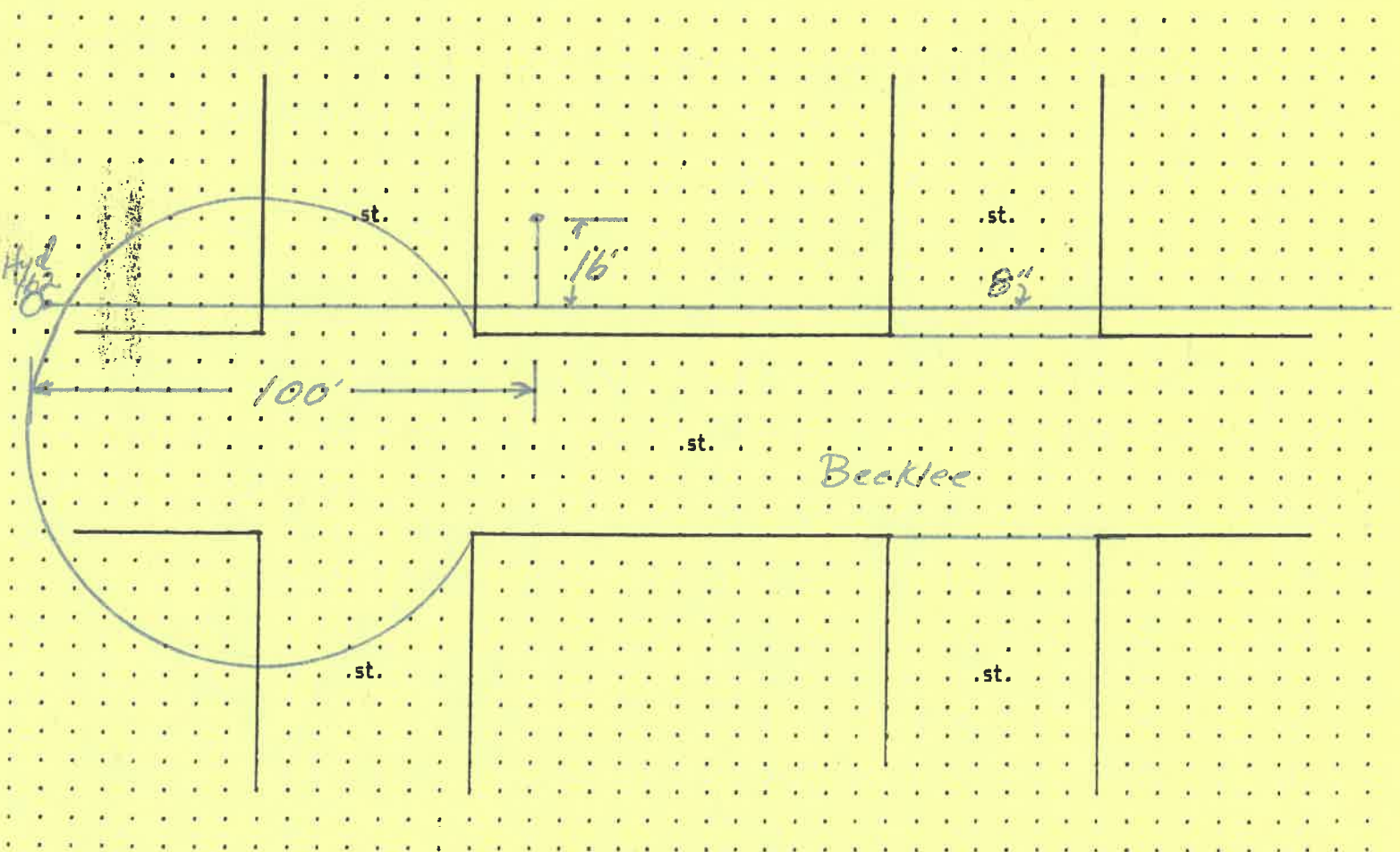
Date completed _____ Approved by Jeffrey E. Mantel
 water distribution dept. _____ finance director

Name Lot #21 Size of tap 1" Date 5-14-96 Street and No. 573 Becklee

Old Tap No. — New Tap No. 9639 Size and Kind of Main 8" C 900

Location of Main 8' North of North curb Depth of Main 5'

Distance from Hydrant/Valve 100' East of Hyd #463 Distance to Curb Stop from Corp. 16'



WATER TAPPING PERMIT

issued by

The Napoleon Water Distribution Department

255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 592-4010

Permit No. W-0252 Issued _____ Received of _____ (\$ _____).00

(Charge for tapping permit to supply water service to) Lot No. _____ Sub Div. _____

Street No. _____ Tap Size _____ " Cost \$ _____ .00 Plumber _____

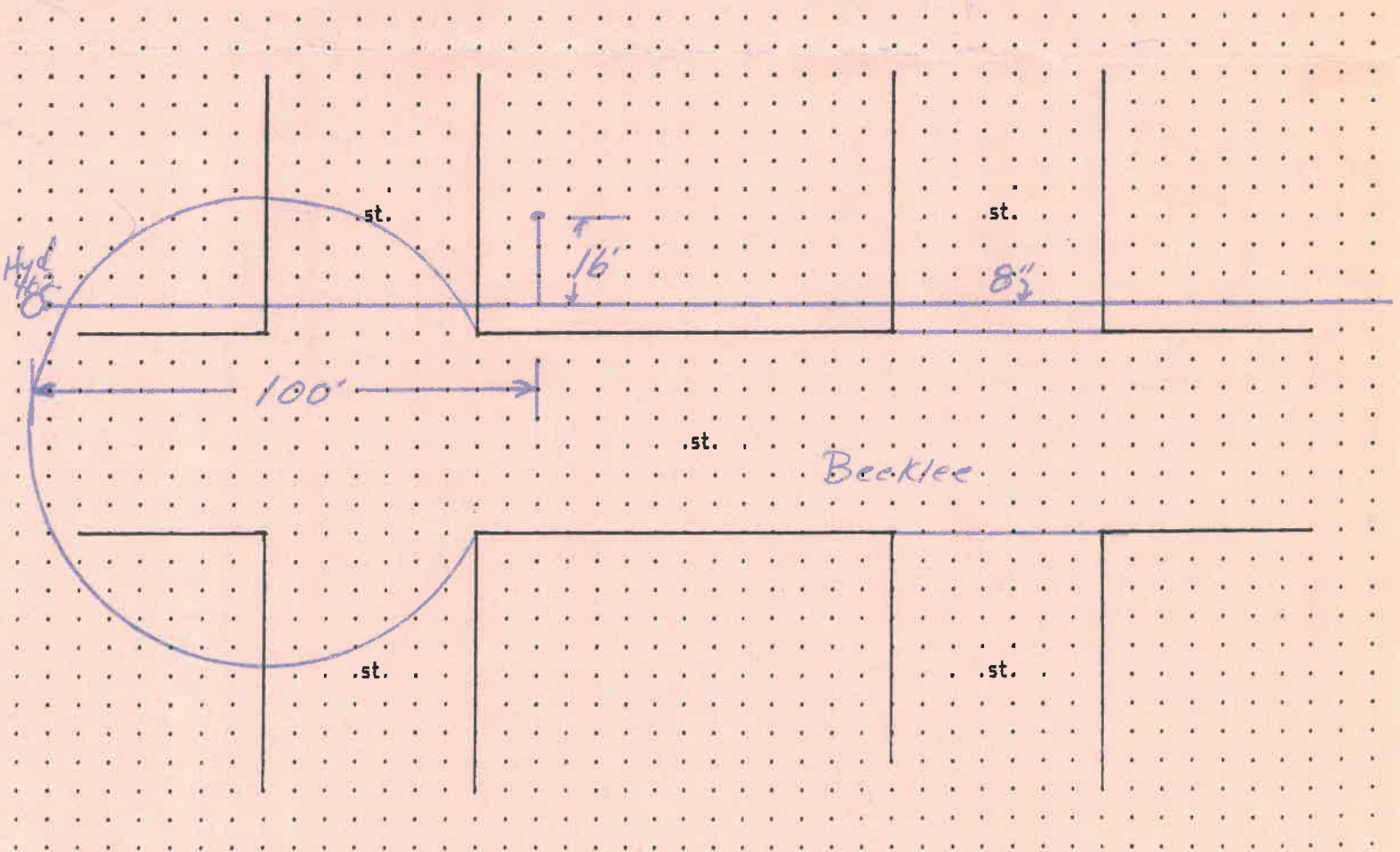
Date completed _____ Approved by Jeffrey P. Mantel water distribution dept. _____ finance director

Name Lot #21 Size of tap 1" Date 5-14-96 Street and No. 573 Becklee

Old Tap No. — New Tap No. 9639 Size and Kind of Main 8" C-900

Location of Main 8' North of North CURB Depth of Main 5'

Distance from Hydrant/Valve 100' East of Hyd #462 Distance to Curb Stop from Corp. 16'



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).

PERMIT #: 99308

ISSUED: 08-31-99

JOB LOCATION: 557 BECKLEE DR

OWNER: BECKS CONSTRUCTION CO

PHONE: 419-592-8307

ADDRESS: 11622 CO RD M NAPOLEON, OH 43545

CONTRACTOR: BECKS CONSTRUCTION CO

ADDRESS: 11-622 CO RD M NAPOLEON, OH 43545

PHONE: 419-592-8307

WATER TAP SIZE 1" X 1.5" _____ 2" _____ OTHER _____

WATER METER YOKE SIZE 5/8" X 3/4" _____ 1" _____ OTHER _____

NEW STRUCTURE X EXISTING STRUCTURE _____ 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 assembly

WATER METER YOKE INSTALLATION IS SUBJECT TO THE FOLLOWING CONDITIONS

- 1.) MUST BE LOCATED IN AN ACCESSIBLE AREA.
- 2.) MUST BE IN AN AREA WHICH 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

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 99308

ISSUED:08-31-99

JOB LOCATION: 557 BECKLEE DR

WORK DESCRIPTION: NEW HOME

OWNER: BECKS CONSTRUCTION CO

ADDRESS: 11622 CO RD M NAPOLEON, OH 43545

OWNER PHONE: 419-592-8307

CONTRACTOR: BECKS CONSTRUCTION CO

ADDRESS: 11-622 CO RD M NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-592-8307

ELECTRIC SERVICE UPGRADE _____ NEW SERVICE INSTALLATION Y

INDUSTRIAL _____ COMMERCIAL _____ RESIDENTIAL X 1PHASE Y 3PHASE _____

SIZE OF SERVICE 100AMP _____ 150AMP _____ 200AMP Y 400AMP _____ OTHER _____

HUB SIZE - 1 1/4" _____ 1 1/2" _____ 2" _____

DESIRED VOLTAGE 120/240 X OTHER _____

UNDERGROUND SERVICE X OVERHEAD SERVICE _____

=====

DATE COMPLETED: _____ APPROVED BY: _____

OLD METER NUMBER: _____ NEW METER NUMBER: _____

COMMENTS:

