

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 360 Date SEPT. 29, 1981
 Job Location 470 BRIARCLIFF Valuation \$ 22,000.00
Address
 Owner DR. A.J. HARR Address 470 BRIARCLIFF
Name
 Contractor MEL LANZER CO. Telephone No. 592-2801
 Address 2266 E. SCOTT ST. NAPOLEON, OHIO
 Electric Contractor JIM SPEISER & SONS
 Plumbing Contractor _____
 Mechanical Contractor _____

This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.

Work Information:

Residential SINGLE FAMILY Commercial _____ Industrial _____
No. dwelling units
 New Construction _____ Addition MUSIC ROOM Remodel _____
 Brief Description of Work ADDITION OF MUSIC ROOM AND SCREENED PORCH

ISSUED BY _____ DEPT. OF BUILDING & ZONING
Building Official

It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- Footing excavation prior to placing concrete.
- Footing drains and foundation prior to backfill.
- _____ Prepared sub-grade prior to placing concrete floor slab.
- _____ Sanitary sewer
- Rough-in electrical, plumbing and service framing prior to installing wall board.
- Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

PERMIT & FEES

Building Permit	\$ <u>3.00</u>
Electrical Permit	\$ <u>8.00</u>
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>11.00</u>
LESS FEES PAID	\$ _____
BALANCE DUE	\$ <u>11.00</u>

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

PAID
 SEP 29 1981
 CITY OF NAPOLEON

INSPECTION RECORD

UNDERGROUND		ROUGH-IN &				FINAL	
Type	Date	By	Type	Date	By	Type	Date
PLUMBING	Sewer Connection		Drainage, W. & Vent			Drainage, W. & Vent	
	Building Sewer		Water Piping			Water Heater	
	Water Piping		Condensate Lines			Backflow Prevention	
			Indirect Waste				
ELECTRICAL	Floor Ducts Raceways		Rough Wiring			FINAL APPROVAL	
	Conduits & or Cable		Conduits/Cable			Signs	
	Grounding & or Bonding		Service Panel				
			Subpanels				
MECHANICAL	Refrigerant Piping		Refrigerant Piping			Duct Insulation	
	Ducts/Plenums		Ducts/Plenums			Chimney(s)	
			Ventilation Supply			Furnace(s)	
			Exhst.			FINAL APPROVAL	
BUILDING	Location, Set-backs, Esmt(s)		Wall Construction			Fireplace Chimney	
	Excavation		Crawl Space			Attic	
	Footings & Reinforcing		Floor System(s)			Special Insp Reports Rec'd	
	Sub-soil Drain		Roof System			Smoke Detector	
	Foundation Walls		Fire Wall(s)			Demolition (sewer cap)	
	Floor Slab		Roof Cover Roof Drain			Building or Structure	
FINAL APPROVAL BLDG. DEPT		1/16/82	Certificate of Occupancy Issued			#	

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ISSUED BY Richard G. Gayman Building Official DEPT. OF BUILDING & ZONING

SEP 29 1981
CITY OF NAPOLEON

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037

Application for a permit to install a fire alarm system in a building. The applicant is the owner of the building and has provided all necessary information regarding the system to be installed. The system is designed to meet all applicable codes and standards. The permit is granted for a period of one year from the date of issuance.

It is the policy of the State of Ohio to encourage the use of fire alarm systems in buildings. This permit is issued in accordance with the provisions of the Fire Code, Chapter 153, of the Revised Code. The permit holder is responsible for maintaining the system in good working order and for notifying the fire department in the event of an alarm.

The permit holder is required to submit a copy of this permit to the fire department in the jurisdiction where the building is located. The permit is valid only for the building and system described herein. Any changes to the system or building must be approved by the fire department. The permit holder is also required to pay the applicable fees for the permit and for the inspection of the system.

PERMIT TO INSTALL

TO: [Name of Applicant]
ADDRESS: [Address of Building]
CITY: [City Name]
COUNTY: [County Name]
STATE: [State Name]
ZONING: [Zoning District]
TYPE OF SYSTEM: [System Description]
DATE OF PERMIT: [Date]

THIS PERMIT IS VALID FOR THE BUILDING AND SYSTEM DESCRIBED HEREIN.

ISSUED BY: [Name of Fire Marshal]
TITLE: [Title]
OFFICE: [Office Name]
DATE: [Date]

FOR MORE INFORMATION, CONTACT THE DIVISION OF FIRE PREVENTION AND CONTROL, 150 EAST BROADWAY, COLUMBUS, OHIO 43260. TELEPHONE: (614) 464-3300.

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR BUILDING PERMIT
(please print or type)

The undersigned hereby makes application for construction, installation, or alternation work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 470 BRIARCLIFF Cost of Project \$22,000⁰⁰

Owner's Name DR. A.J. HAHN Address 470 BRIARCLIFF

Contractor MEL LAZZER CO Telephone No. 592-2801

Address 2266 N. SCOTT ST NAPOLEON OHIO

Lot Information: (not required for siding job)

Lot No. _____ Subdivision ANTHONY WAYNE ACRES

Zoning District _____ Lot Size 100.82 ft X 235^{AVG} ft. Area 23693 sq. ft.

Setbacks: Front 65' Right Side 13' Left Side 10' Rear _____

Work Information:

Residential Commercial _____ Industrial _____

New Construction _____ Addition Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: NEW MUSIC RM ADDITION, & SCREENED IN PORCH Specific Type _____

Size: Length 22' Width 31' No. of Stories 1

Area: 1st Floor 682 sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Building _____ sq. ft.

3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: _____

*APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 9/28/81 Applicant's Signature Max Ostroviak

PERMIT NO. 360
PERMIT FEE \$ 3.00

465

Briarcliff Dr.

450

460

470

13 1/2
16 1/2

480



