

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: 1637

DATE ISSUED: 05-28-03

ISSUED BY: BND

JOB LOCATION: 642 BRIARHEATH AVE

EST. COST: 3000.00

LOT #: 62

SUBDIVISION NAME: GH 5TH

OWNER: SMITH, SHAWN  
ADDRESS: 429 S PERRY ST APT 100  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-655-3715

AGENT: WAYNE HOMES, LLC  
ADDRESS: 6489 S DIXIE HWY  
CSZ: CYGNET, OH 43413  
PHONE: 419-655-3715

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  
FOUNDATION ONLY!!!

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

BUILDING PERMIT

36.00



TOTAL FEES DUE

36.00

-----  
DATE

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APPLICANT SIGNATURE

DIVISION OF BUILDING & SAFETY  
100 E. RIVERVIEW AVE  
NAPOLION, OHIO 44325  
TEL (419) 522-5222  
FAX (419) 522-5222

FORM 17

CITY OF NAPOLION  
100 E. RIVERVIEW AVE  
NAPOLION, OHIO 44325

PERMIT NO: 1234 DATE ISSUED: 01-15-21 ISSUED BY: JWS

LOT # 12 THE LOCATION: 143 BRADSHAW AVE EXT. COST: \$200,000

APPLICANT NAME: OF THE

OWNER: JOHN & JANE SMITH  
ADDRESS: 143 BRADSHAW AVE  
CITY: NAPOLION, OH 44325  
PHONE: 419-522-5222

USE TYPE: RESIDENTIAL

FOUNDING CONTRACTOR

PERMITS: LOT 1234  
MAX LOT: 4 PER SPACES  
MAX LOT: 4 PER SPACES

BOARD OF ZONING APPEALS

WORK TYPE - NEW

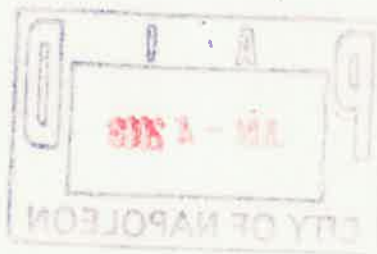
WORK INFORMATION

DATE - 01/15/21  
CITY AREA 201

WORK DESCRIPTION  
POLYMER DRIVE

PERMITS

PERMITS



TOTAL FEE DUE \$2,000

APPLICANT SIGNATURE DATE

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 #: 1637

ISSUED: 05-28-2003

JOB LOCATION: 642 BRIARHEATH AVE

OWNER: SMITH, SHAWN

PHONE: 419-655-3715

ADDRESS: 429 S PERRY ST APT 100 NAPOLEON, OH 43545

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CONTRACTOR: WAYNE HOMES, LLC

ADDRESS: 6489 S DIXIE HWY CYGNET, OH 43413

PHONE: 419-655-3715

WATER TAP SIZE 1"  1.5" \_\_\_\_\_ 2" \_\_\_\_\_ OTHER \_\_\_\_\_

WATER METER YOKE SIZE 5/8"  3/4" \_\_\_\_\_ 1" \_\_\_\_\_ OTHER \_\_\_\_\_

NEW STRUCTURE  EXISTING STRUCTURE \_\_\_\_\_ LAWN METER \_\_\_\_\_

WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING OF 1" MINIMUM SIZE.

BACKFLOW DEVICE REQUIRED YES  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 #: 1637

ISSUED: 05-28-2003

JOB LOCATION: 642 BRIARHEATH AVE

WORK DESCRIPTION: FOUNDATION ONLY!!!

OWNER: SMITH, SHAWN

ADDRESS: 429 S PERRY ST APT 100 NAPOLEON, OH 43545

OWNER PHONE: 419-655-3715

-----  
CONTRACTOR: WAYNE HOMES, LLC

ADDRESS: 6489 S DIXIE HWY CYGNET, OH 43413

CONTRACTOR PHONE: 419-655-3715

ELECTRIC SERVICE UPGRADE \_\_\_\_\_ NEW SERVICE INSTALLATION

INDUSTRIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ RESIDENTIAL  1PHASE  3PHASE \_\_\_\_\_

SIZE OF SERVICE 100AMP \_\_\_\_\_ 150AMP \_\_\_\_\_ 200AMP  400AMP \_\_\_\_\_ OTHER \_\_\_\_\_

HUB SIZE - 1 1/4" \_\_\_\_\_ 1 1/2" \_\_\_\_\_ 2" \_\_\_\_\_

DESIRED VOLTAGE 120/240  OTHER \_\_\_\_\_

UNDERGROUND SERVICE  OVERHEAD SERVICE \_\_\_\_\_

=====

DATE COMPLETED: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

OLD METER NUMBER: \_\_\_\_\_ NEW METER NUMBER: \_\_\_\_\_

COMMENTS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

↓  
Put in on 6-6-03



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1637

DATE ISSUED: 05-28-2003

JOB LOCATION: 642 BRIARHEATH AVE

OWNER: SMITH, SHAWN

OWNER PHONE: 419-655-3715

CONTRACTOR: WAYNE HOMES, LLC

CONTRACTOR PHONE: 419-655-3715

WORK DESCRIPTION: FOUNDATION ONLY!!!

PLUMBING:      UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  SEWER INSP \_\_\_\_\_

MECHANICAL:   UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  FURNACE REPLC \_\_\_\_\_      AIR COND \_\_\_\_\_

ELECTRICAL:   UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  SERV UPGR \_\_\_\_\_

BUILDING:      SITE 6-5-03 FTG basement-6-13-03 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: \_\_\_\_\_





# BUILDING INSPECTION REQUEST FORM

LOCATION <sup>64d</sup> Lot 02 Briar Heath Permit# 1037/1010

Owner Name Shawn Smith

Contractor Name Wayne Home

Contractor Cell and/or Job Phone# 419 680-0118

Date and time setup for inspection 6-23-03 1:30pm

Must have a minimum of 2hour notice. Check calendar for scheduling conflicts.

- Building
- Footer
- Foundation
- Temporary Pole
- Electric Rough
- Electric Service
- Electric Final
- Plumbing Rough
- Plumbing Final
- Plumbing Underground

- Demolition
- Heating Rough
- Heating Final
- Sidewalk/Driveway
- Sign
- Swimming Pools
- Temporary Occupancy
- Occupancy
- Sewer Inspection
- Other \_\_\_\_\_

Back Fill

*Need stone first, did not backfill until stone is placed over footer till 1' min depth. 6-23-03*

**APPROVED**



# BUILDING INSPECTION REQUEST FORM

LOCATION 1042 Briar Heath Permit# 1037/1010

Owner Name Shawn Smith

Contractor Name Wayne Home

Contractor Cell and/or Job Phone# 419 680-0118

Date and time setup for inspection 6-26-03 10:00 am

Must have a minimum of 2hour notice. Check calendar for scheduling conflicts.

- Building
- Footer
- Foundation
- Temporary Pole
- Electric Rough
- Electric Service
- Electric Final
- Plumbing Rough
- Plumbing Final
- Plumbing Underground

- Demolition
- Heating Rough
- Heating Final
- Sidewalk/Driveway
- Sign
- Swimming Pools
- Temporary Occupancy
- Occupancy
- Sewer Inspection

Other How backfill  
6-26-03 O.K.

APPROVED

APPROVED