

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

Permit No. 2603 Issued 4/8/92

Job Location 109 Brownell

Lot _____

Issued by Brent N. Damman

Owner Rick Berg 592-0753

Address 109 Brownell, Napoleon, OH

Agent Self

Address _____

Use Type - Residential xx

Other - Describe _____

No. Dwelling Units 1

New _____ Replacement xx

Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 10,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> Building	\$ 9.00	\$ 48.00	\$ 57.00
<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
<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.....			\$ 57.00
LESS FEES PAID.....			\$ _____
BALANCE DUE.....			\$ 57.00

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: _____

Plumbing: _____

Mechanical: _____

Additional Information: Siding and window replacement

Date 4-8-92 Applicant Signature x Rick Berg

PAID
AUG 10 1992
 CITY OF NAPOLEON



City of NAPOLEON, OHIO

255 RIVERVIEW AVENUE - (419) 592-4010
NAPOLEON, OHIO 43545-0151

July 31, 1992

Mayor
Steven Lankenau

Mr. Rick Berg
109 Brownell
Napoleon, Ohio 43545

Members of Council
Terri A. Williams, President
John E. Church
Michael J. DeWit
Dennis L. Filgor
Robert G. Heft
James Hershberger

Re: *Siding and Window
Replacement*

Dear Mr. Berg:

On April 8, 1992 you applied for a Building Permit for the work referenced above to your residence. The balance due on this permit is \$57.00. I would appreciate it if you could take care of this permit at your earliest convenience.

City Manager
Terry Dunn

Sincerely,

Brent N. Damman
Building and Zoning
Administrator

Finance Director
Rupert W. Schweinhagen

Law Director
Michael J. Wesche

Prosecuting Attorney
Thomas L. Bischoff

BND:rw

COMPLETED

APPLICATION
for
RESIDENTIAL, BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS AND DEMOLITION
from the
CITY OF NAPOLEON - BUILDING DEPARTMENT
255 West Riverview Avenue, Napoleon, Ohio 43545 - Phone 419-592-4010

Entry No. _____		<u>BASE</u>	<u>PLUS</u>	<u>TOTAL</u>
Permit No. <u>2603</u> Issued <u>4-8-92</u> :	<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>48.00</u>	\$ <u>57.00</u>
Job Location <u>109 Brownell</u> :	<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
Lot _____ :	<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
sub-div or legal description _____ :	<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
Issued by <u>BND</u> Building Official _____ :	<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
Owner <u>Rick Berg</u> Phone <u>572-0753</u> _____ :	<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
Address <u>109 Brownell</u> _____ :	<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
Agent <u>Self</u> Phone _____ :	<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
Address _____ :	<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
Description of Use <u>Residential</u> _____ :	<input type="checkbox"/> Temp Water	\$ _____	\$ _____	\$ _____
Residential <u>1</u> _____ :	<input type="checkbox"/> Temp Elec.	\$ _____	\$ _____	\$ _____
(number dwelling units) _____ :	Additional Structure _____	Hours _____		
Commercial _____ Industrial _____ New _____ :	Plan _____			
New _____ Addition _____ Replacement <input checked="" type="checkbox"/> Remodel _____ :	Review _____	Electric _____	Hours _____	
Mixed Occupancy _____ Change of Occupancy _____ :				
<input checked="" type="checkbox"/> Estimated Cost: \$ <u>10,000.00</u> _____ :	TOTAL FEES -----			\$ <u>57.00</u>
	Less Fees Paid (date) _____			\$ _____
	BALANCE DUE -----			\$ <u>57.00</u>

ZONING INFORMATION:

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard

WORK INFORMATION:

Building - Garage Floor Area _____	Basement Floor Area _____	2nd Floor Area _____	PAID
Size - Length _____	Width _____	Stories _____	AUG 10 1992
Height _____	Building Volume (For Demolition Permit) _____		
Description of Work: <u>Siding + Window Replacement</u>			

CITY OF NAPOLEON
CUBIC FEET

ELECTRICAL: Electrical Contractor _____ Phone _____

Address _____ Estimated Cost: \$ _____

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

Size of Service _____ 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 _____