

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

Permit No. <u>3269</u> Issued <u>07/12/94</u> Job Location <u>505 Buckeye</u> Lot _____ Issued by <u>Brent N. Damman</u> Owner <u>Roger Smith 592-0293</u> Address <u>505 Buckeye Napoleon, OH</u> Agent <u>S &amp; N Builders 762-5550</u> Address <u>I-158 Co. Rd. 17 Holgate, OH</u> Use Type - Residential <u>X</u> Other - Describe _____ No. Dwelling Units _____ New _____ Replacement <u>X</u> Add'n. _____ Alter _____ Remodel _____ Mixed Occupancy _____ Change of Occupancy _____ Estimated Cost \$ <u>85,000.00</u>	<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">FEES</th> <th style="text-align: right;">BASE</th> <th style="text-align: right;">PLUS</th> <th style="text-align: right;">TOTAL</th> </tr> <tr> <td><input checked="" type="checkbox"/> Building</td> <td style="text-align: right;">\$ 9.00</td> <td style="text-align: right;">\$ 198.00</td> <td style="text-align: right;">\$ 207.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Electrical</td> <td style="text-align: right;">\$ 15.00</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$ 15.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Plumbing</td> <td style="text-align: right;">\$ 9.00</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$ 9.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Mechanical</td> <td style="text-align: right;">\$ 18.00</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$ 18.00</td> </tr> <tr> <td><input type="checkbox"/> Demolition</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Zoning</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Sign</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Water Tap</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Sew. Insp.</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Sewer Tap</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Temp. Water</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td><input type="checkbox"/> Temp. Elec.</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td colspan="3">TOTAL FEES.....</td> <td style="text-align: right;">\$249.00</td> </tr> <tr> <td colspan="3">LESS FEES PAID.....</td> <td style="text-align: right;">\$249.00</td> </tr> <tr> <td colspan="3">BALANCE DUE.....</td> <td style="text-align: right;">\$ -0-</td> </tr> </table>	FEES	BASE	PLUS	TOTAL	<input checked="" type="checkbox"/> Building	\$ 9.00	\$ 198.00	\$ 207.00	<input checked="" type="checkbox"/> Electrical	\$ 15.00	\$	\$ 15.00	<input checked="" type="checkbox"/> Plumbing	\$ 9.00	\$	\$ 9.00	<input checked="" type="checkbox"/> Mechanical	\$ 18.00	\$	\$ 18.00	<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.....			\$249.00	LESS FEES PAID.....			\$249.00	BALANCE DUE.....			\$ -0-
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**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: Fire damage repairs

Date 7-12-94 Applicant Signature *Steve P. Stung*

**PAID**  
**JUL 12 1994**  
 CITY OF NAPOLEON



**APPLICATION FOR**

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit  
 FROM - The City of Napoleon, Ohio, Building Department  
 255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

81  
162

ENTRY NO. \_\_\_\_\_  
 PERMIT NO. 219 ISSUED 7-12-94  
 JOB LOCATION 505 Buckeye  
 LOT \_\_\_\_\_  
 (Subdivision or Legal Description)  
 ISSUED BY BND  
 (Building Official)

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>198.00</u>	\$ <u>207.00</u>
<input checked="" type="checkbox"/> Electrical	\$ <u>15.00</u>	\$ _____	\$ <u>15.00</u>
<input checked="" type="checkbox"/> Plumbing	\$ <u>9.00</u>	\$ _____	\$ <u>9.00</u>
<input checked="" type="checkbox"/> Mechanical	\$ <u>18.00</u>	\$ _____	\$ <u>18.00</u>
<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Water	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Elec.	\$ _____	\$ _____	\$ _____

OWNER ROGER SMITH PHONE 592-0293  
 ADDRESS 505 BUCKEYE LN  
 AGENT S&N BUILDERS PHONE 762-5550  
 ADDRESS I-158 CO RD 17 HOLGATE, OH  
 USE:  Residential  Commercial  Industrial  
 Other \_\_\_\_\_  
 WORK:  New  Addition  Replacement  Remodel  
 ESTIMATED COST = \$ 85,000.00

Additional Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
 Electric \_\_\_\_\_ Hours \_\_\_\_\_  
 TOTAL FEES . . . . . \$ 249.00  
 Less Fees Paid . . . . . \$ 249.00  
 BALANCE DUE . . . . . \$ 0.00

**ZONING INFORMATION**

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard

Max Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition or Appeal Required-Date

**WORK INFORMATION**

Building: Ground Floor Area \_\_\_\_\_ sq. ft. Basement Floor Area \_\_\_\_\_ sq. ft.  
 Garage Floor Area \_\_\_\_\_ sq. ft. 2nd Floor Area \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.  
 Size: Width \_\_\_\_\_ Length \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_  
 Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet  
 Description of Work: Fire damage repairs

**PAID**  
 JUL 12 1994  
 CITY OF NAPOLEON

**ELECTRICAL:** Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ ESTIMATED COST = \$ \_\_\_\_\_

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

Size of Service \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_ Number of New Circuits \_\_\_\_\_

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 = \_\_\_\_\_ Bathtubs = \_\_\_\_\_ Showers = \_\_\_\_\_ Lavatories = \_\_\_\_\_ Kitchen Sinks = \_\_\_\_\_ Disposal = \_\_\_\_\_

Clothes Washer = \_\_\_\_\_ Floor Drains = \_\_\_\_\_ Dishwasher = \_\_\_\_\_ Other \_\_\_\_\_ Total = \_\_\_\_\_

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 \_\_\_\_\_

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 \_\_\_\_\_

22-75

CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR ELECTRICAL PERMIT  
(PLEASE PRINT OR TYPE)

The undersigned hereby makes application for the installation, replacement, or alteration of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Code for 1, 2 and 3 Family Buildings.

Owner's Name PAUL LEIFER JR Address 920 W WASHINGTON

Contractor's Name HOWARD MITCHELL Address 1035 HIGHLAND Tel. 5921217

LOT INFORMATION:

Location of Project ANTHONY WAYNE ACRES Zoning District \_\_\_\_\_

BUILDING INFORMATION:

Single Family  Double Family \_\_\_\_\_ Multiple Family \_\_\_\_\_

New Construction  Existing \_\_\_\_\_ Addition \_\_\_\_\_

Replacement \_\_\_\_\_ Remodel \_\_\_\_\_ Service Change \_\_\_\_\_

Size: Total Square Foot Per Floor 1566 No. of Stories 2 1040

DESCRIPTION OF WORK

Size of Service 200 AMP. Service Change Only \_\_\_\_\_ (Yes or No)

Total Number of New Circuits 29 Total Number of New Circuits Excluding Appliance Circuits 10

APPLIANCE CIRCUITS: (indicate quantity)

Electric Range  Range Hood  Clothes Dryer  Dishwasher \_\_\_\_\_

Air Conditioner  Attic Fan Blower \_\_\_\_\_ Room Exhaust Fan 3

Disposal  Hot Water Heater  Electric Oven \_\_\_\_\_

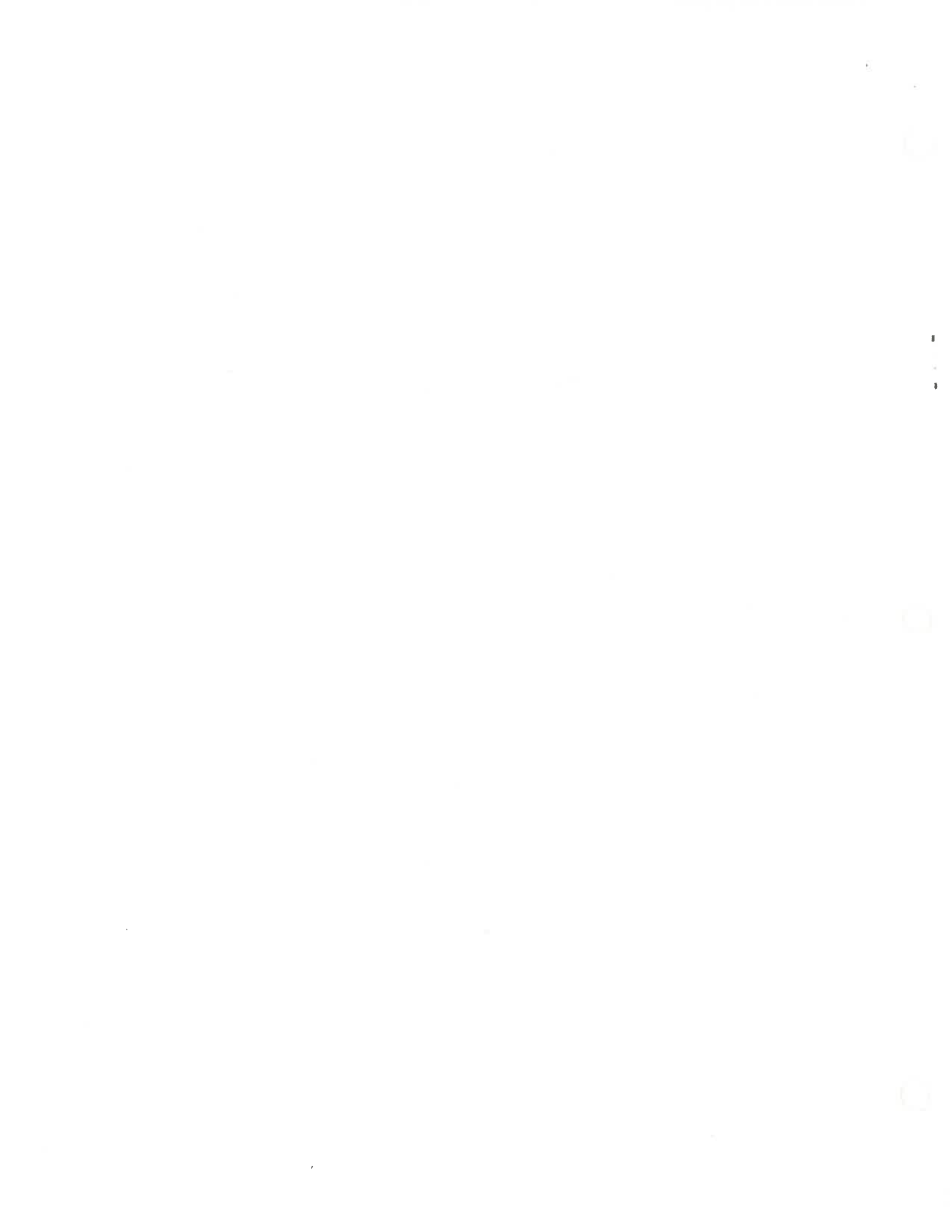
Require Temporary Electric yes (Yes or No)

Note: G.F.I.C. required for all temporary electric with approved ground rod at service.

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELECTRICAL LAY-OUT AND RISER DIAGRAM.

ESTIMATED COST OF COMPLETED PROJECT: 2500

DATE \_\_\_\_\_ APPLICANT'S SIGNATURE \_\_\_\_\_  
OWNER-CONTRACTOR-AGENT



CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR PLUMBING PERMIT \$13.00  
(PLEASE PRINT OR TYPE)

TOTAL

3.00

10.00

The undersigned hereby makes application for the installation, replacement or alteration of plumbing system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Code for 1, 2 and 3 Family Buildings.

Owner's Name PAUL LEIFER JR. Address 920 W. WASHINGTON

Contractor's Name HOWARD MITCHELL Address 1035 HIGHLAND Tel. 592-1217

BUILDING INFORMATION:

Single Family  Double Family  Multiple Family  New Construction

Addition  Remodel  Replacement  No. of Stories 2

DESCRIPTION OF WORK

Drainage Pipe of: Cast Iron  Copper  Other ABS

Size of Main Building Drain: 4" ABS Other

Size of Main Vent Stack: 3" B 4" Other

Require Water Tap: yes (Yes or No) Require Sewer Tap: yes

Size and Type of Water Tap 3/4 COPPER

Size and Type of Sewer Tap 6' GLAZED TILE Type of Joints PREMIUM SEAL

No. of Water Closets 3 No. of Sump Pumps 1

No. of Bathtubs 1 No. of Lavatories 3

No. of Kitchen Sinks 1 No. of Automatic Washers 1

No. of Disposals 1 No. of Hot Water Heaters 1

No. of Dishwashers 1 No. of Shower Receptors 1

No. of Floor Drains  Other (specify)

Storm Drainage Outlet to: Storm Sewer  Other

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF A DRAINAGE ISOMETRIC, WITH ALL PIPES AND TRAPS PROPERLY SIZED. MUST INDICATE TOTAL DRAINAGE FIXTURE UNIT VALUE (dfu).

ESTIMATED COST OF COMPLETED PROJECT: \$2500.00

DATE  APPLICANT'S SIGNATURE

OWNER-CONTRACTOR-AGENT





CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR HEATING PERMIT  
(PLEASE PRINT OR TYPE)

6  
3  
9.00

The undersigned hereby makes application for the installation, replacement or alteration of a heating system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Mechanical Code for 1, 2 and 3 Family Buildings.

Owner's Name PAUL LEIFER JR Address 920 W WASHINGTON  
Contractor's Name HOWARD MITCHELL Address 1035 HIGHLAND Tel. 592-1217

BUILDING INFORMATION:

Single Family  Double Family \_\_\_\_\_ Multiple \_\_\_\_\_ New Construction   
Addition \_\_\_\_\_ Remodel \_\_\_\_\_ Replacement \_\_\_\_\_ No. of Stories 2

DESCRIPTION OF WORK

Heating System - Warm Air  Hot Water \_\_\_\_\_ Steam \_\_\_\_\_ Electric \_\_\_\_\_

Unit Heaters \_\_\_\_\_ Unit Gas Heaters \_\_\_\_\_ Other \_\_\_\_\_

Type - Gravity \_\_\_\_\_ Forced  Radiant \_\_\_\_\_

No. of Thermostatical Heating Zone 1

Hot Water - One Pipe \_\_\_\_\_ Two Pipe \_\_\_\_\_ Series Loop \_\_\_\_\_

Electric Heat - No. of Circuits 1 Other \_\_\_\_\_

Total Heat Loss of Area to be Heated 75000

Rated Capacity of Furnace/Boiler \_\_\_\_\_

No. of Furnaces 1 No. of Hot Air Runs 13

No. of Hot Water Radiators \_\_\_\_\_ Type of Fuel Gas or Electric

Heating Units Located: Crawl Space \_\_\_\_\_ Floor Level  Suspended \_\_\_\_\_

Roof or Exposed to Outside Air \_\_\_\_\_ Attic \_\_\_\_\_ Other \_\_\_\_\_

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: 2000<sup>00</sup>

DATE \_\_\_\_\_ APPLICANT'S SIGNATURE \_\_\_\_\_  
OWNER-CONTRACTOR-AGENT

