

PERMIT

City of Napoleon
255 W. Riverview
Napoleon, OH 43545

Division of Building and Zoning
PH (419) 592-4010
FAX (419) 599-8393

Permit No: 001972

Date Issued: 12-12-03

Issued by: BND

Job Location: 470 CAMBRIDGE ST

Est. Cost: 100000.00

Lot #: 10

Subdivision Name: PICKET FENCES 3

Owner: KUIVIAL, MIKE
Address: 606 1/2 FIRST ST
CSZ: DEFIANCE, OH 43512
Phone:

Agent: BECKS CONSTRUCTION C
Address: 11-622 CO RD M
CSZ: NAPOLEON, OH 43545
Phone: 419-592-8307

Use Type - Residential:

Other: PORCH178

ZONING INFORMATION

Dist: R-3 Lot Dim: 76X105 Area: 7980 Fyrd: 25 Syrd: 7 Ryrd: 15
Max HT: 40 # Pkg Spaces: 2 # Loading SP: Max Lot Cov: 45%

BOARD OF ZONING APPEALS:

Work Type - New: X Replmnt: Addn'n: Alter: Remodel:

WORK INFORMATION

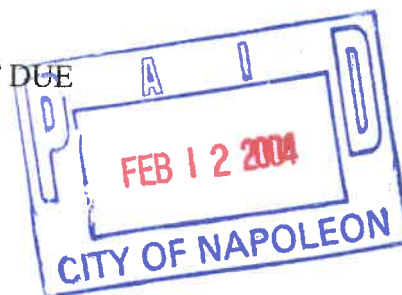
Size - Lgth: 54 Width: 45 Stories: 1 Living Area SF: 1390
Garage Area SF: 529 Height: 18 Bldg Vol Demo Permit:

WORK DESCRIPTION

NEW HOME

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		237.00
ELECTRICAL PERMIT		100.00
PLUMBING PERMIT		39.00
MECHANICAL PERMIT		18.00
WATER TAP PERMIT		203.00
SEWER PERMIT		156.00

Total Fees Due 753.00



Date

Applicant Signature

City of Napoleon Inspection Form

Permit #001972

Date Issued: 12-12-2003

Job Location: 470 CAMBRIDGE ST

Owner: KUIVIAL, MIKE

Owner Phone:

Contractor: BECKS CONSTRUCTION CO

Contractor Phone: 419-592-8307

Work Description: NEW HOME

Plumbing: UNDGR _____ RGHIN 2-27 FINAL 5-24

SEWER INSP 12-17

Mechanical: UNDGR _____ RGHIN 2-27 FINAL 5-24

FURNACE REPLAC _____ AIR COND _____

Electrical: UNDGR _____ RGHIN _____ FINAL 5-24

SEVR UPGR _____

Building: Site _____ FTG _____ FNDDT _____

STRU 2-27 ROOF 5-24 EXT 5-24

VENT 2-27 ACCES 5-24 EGRS 5-24

SMKDT 5-24 FINAL 5-24

ISSUE TEMP OCCUP _____ ISSUE OCCUP 5-24

STGE Shed: SITE _____ FINAL _____

Sign: FTG _____ FINAL _____

Fence: SITE _____ FINAL _____

MISC INSP: Driveway 5-5-04 BND

NOTES: _____

INSPECTORS INITIALS: _____

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

ENTRY NO. _____

PERMIT NO. _____ ISSUED 12-11-03

JOB LOCATION 470 Cambridge St.

LOT 10 Pickett Frances Phoe III
 (Subdivision or Legal Description)

ISSUED BY _____
 (Building Official)

OWNER Mike Kuivial PHONE 782-7421

ADDRESS 606 1/2 1st. St. Defiance

AGENT Beck's Construction PHONE _____

ADDRESS _____

USE: Residential () Commercial () Industrial
 Other _____

WORK: New () Addition () Replacement () Remodel

ESTIMATED COST = \$ 100,000.00

	Base	Plus	Total
<input checked="" type="checkbox"/> Building	\$ _____	\$ _____	\$ <u>237.00</u>
<input checked="" type="checkbox"/> Electrical	\$ <u>15.00</u>	\$ <u>85.00</u>	\$ <u>100.00</u>
<input checked="" type="checkbox"/> Plumbing	\$ <u>9.00</u>	\$ <u>30.00</u>	\$ <u>39.00</u>
<input checked="" type="checkbox"/> Mechanical	\$ <u>18.00</u>	\$ _____	\$ <u>18.00</u>
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Water Tap	\$ <u>198.00</u>	\$ <u>5.00</u>	\$ <u>203.00</u>
<input checked="" type="checkbox"/> Sewer Tap	\$ <u>96.00</u>	\$ <u>60.00</u>	\$ <u>156.00</u>
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Plan Review: Structure _____ Hours _____
 Electric _____ Hours _____

TOTAL FEES \$ _____
 Less Fees Paid \$ _____
 BALANCE DUE \$ _____

ZONING INFORMATION

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard
<u>R-3</u>	<u>76x105</u>	<u>7980</u>	<u>25</u>	<u>7</u>	<u>15</u>

Max Height	No. Pkg. Spaces	No. Lq. Spaces	Max Cover	Petition or Appeal Required-Date
<u>40'</u>	<u>2</u>		<u>45%</u>	

WORK INFORMATION

Building: Ground Floor Area 1390 sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area 529 sq. ft. 2nd Floor Area _____ sq. ft. Other porches 178 sq. ft.
 Size: Length 54' Width 45' Stories 1 Height 18'
 Building Volume (for Demolition Permit) _____ cubic feet
 Description of Work: New Home

ELECTRICAL: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: () New () Service Change () Rewiring () Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes ()
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 = 2 Bathtubs = 1 Showers = 1 Lavatories = 3 Kitchen Sinks = 1 Disposal = 1
Clothes Washer = _____ 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 _____

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 Plan, 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 agree 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 = \$ _____
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 = 2 Bathtubs = 1 Showers = 1 Lavatories = 3 Kitchen Sinks = 1 Disposal = 1
Clothes Washer = _____ 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 _____
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 Plan, 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.

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Signature of Applicant _____ Date _____

Certificate No: 1018

CERTIFICATE OF OCCUPANCY
THE CITY OF NAPOLEON

ENGINEERING DEPARTMENT
DIVISION OF INSPECTION

This is to certify that the Building or Land herin described complies with all the building and health laws and ordinance and with the provisions of the Zoning Ordinance.

Location of Occupancy: 470 CAMBRIDGE ST

Occupancy: SF

Owner of Property: KURIVIAL, MIKE

Address: 606 1/2 FIRST ST

Issued to: KURIVIAL, MIKE

Zoning: R-3

Substantial qualifications of occupancy

This certificate is issued by the City Building Inspector, as completed substantially in conformity with the approved plans and permission is herby granted to occupy such building in compliance with such legal use and occupancy as authorized under the provisions of the ordinances of the City of Napoleon.

Issued:

Signed


City Building Inspector

This is a valuable record for owner or lessee and should be so preserved.

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#001972

Date Issued: 12-12-2003

Job Location: 470 CAMBRIDGE ST

Work Description: NEW HOME

Owner: KUIVIAL, MIKE

Address: 606 1/2 FIRST ST DEFIANCE, OH 43512

Owner Phone: _____

Contractor: BECKS CONSTRUCTION CO

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

Contractor Phone: 419-592-8307

Electric Service Upgrade _____ New Service Installation X
Industrial _____ Commercial _____ Residential X 1 Phase X 3 Phase _____

Size of Service 100 Amp _____ 150 Amp _____ 200 Amp X 400 Amp _____ 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: _____

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 #001972

Date Issued: 12-12-2003

Job Location: 470 CAMBRIDGE ST

Owner: KUIVIAL, MIKE

Address: 606 1/2 FIRST ST DEFIANCE, OH 43512

Owner Phone:

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 Required: DCVA

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

