

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: 1425

DATE ISSUED: 11-20-02

ISSUED BY: MRD

JOB LOCATION: 490 CAMBRIDGE ST

EST. COST: 85000.00

LOT #: 11

SUBDIVISION NAME: PICKET FEN III

OWNER: LANKENAU, STEVE
ADDRESS: 539 W WASHINGTON ST
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-7335

AGENT: BECKS CONSTRUCTION C
ADDRESS: 11-622 CO RD M
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-8307

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: R-3 LOT DIM: 76X105 AREA: 7980 FYRD: 25 SYRD: 7 RYRD: 15
MAX HT: 45' # PKG SPACES: 2 # LOADING SP: MAX LOT COV: 45%

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: X REPLMNT: ADD'N: ALTER: REMODEL:

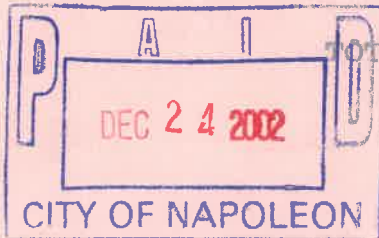
WORK INFORMATION

SIZE - LGTH: 62' WIDTH: 32' STORIES: 2 LIVING AREA SF: 1040
GARAGE AREA SF: 484 HEIGHT: 22 BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
NEW HOME

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT	11-18-02	207.00
ELECTRICAL PERMIT	11-18-02	85.00
PLUMBING PERMIT	11-18-02	39.00
WATER TAP PERMIT	11-18-02	203.00
SEWER PERMIT	11-18-02	60.00
MECHANICAL PERMIT	11-18-02	18.00

TOTAL FEES DUE 612.00 \$ 160.00



DATE

APPLICANT SIGNATURE

credit applied from permit # 1421

\$452.00 Credit from permit # 1421 applied to this permit

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 _____
 JOB LOCATION 490 Cambridge St
 LOT 11 Picket Fences III
 (Subdivision or Legal Description)
 ISSUED BY _____
 (Building Official)
 OWNER Steve Lankau PHONE 592-7335
 ADDRESS 539 W Washington
 AGENT Becks Const. PHONE _____
 ADDRESS _____
 USE: Residential () Commercial () Industrial
 () Other _____
 WORK: New () Addition () Replacement () Remodel
 ESTIMATED COST = \$ 85000.00

	Base	Plus	Total
<input checked="" type="checkbox"/> Building	\$ _____	\$ _____	\$ <u>207.00</u>
<input checked="" type="checkbox"/> Electrical	\$ <u>15.00</u>	\$ <u>10.00</u>	\$ <u>85.00</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>60.00</u>
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Structure _____ Hours _____
 Plan Review: 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>76 X 105</u>	<u>7980</u>	<u>25</u>	<u>7</u>	<u>15</u>
Max Height	No. Pkr. Spaces	No. Lq. Spaces	Max Cover	Petition or Appeal Required-Date	
<u>45'</u>	<u>2</u>		<u>45%</u>		

WORK INFORMATION

Building: Ground Floor Area 1040 sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area 484 sq. ft. 2nd Floor Area _____ sq. ft. Other Porch 240 sq. ft.
 Size: Length 62' Width 32 Stories 2 Height 22'
 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 () 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 = 2 Showers = _____ Lavatories = 2 Kitchen Sinks = 1 Disposal = 1
Clothes Washer = 1 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 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 _____

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1425

DATE ISSUED: 11-20-2002

JOB LOCATION: 490 CAMBRIDGE ST

OWNER: LANKENAU, STEVE

OWNER PHONE: 419-592-7335

CONTRACTOR: BECKS CONSTRUCTION CO

CONTRACTOR PHONE: 419-592-8307

WORK DESCRIPTION: NEW HOME

PLUMBING: UNDGR _____ RGHIN 2-25 FINAL _____

SEWER INSP 11-26

MECHANICAL: UNDGR _____ RGHIN 2-25 FINAL _____

FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

SERV UPGR _____

BUILDING: SITE 11-19 FTG 11-19 FNDDT 11-26

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: SMH

Certificate No: 1010

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: 490 CAMBRIDGE ST

Occupancy: SF

Owner of Property: LANKENAU, STEVE

Address: 490 CAMBRIDGE ST


Issued to: LANKENAU, STEVE

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 hereby 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: 1-16-04

Signed 
City Building Inspector

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

