

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: 1233

DATE ISSUED: 07-17-02

ISSUED BY: MRD

JOB LOCATION: 545 CAMBRIDGE ST

EST. COST: 92000.00

LOT #: 26

SUBDIVISION NAME: PICKET FENCES

OWNER: KURIVIAL, MIKE  
ADDRESS: 606 1/2 1ST ST  
CSZ: DEFIANCE, OH 43512  
PHONE: 419-782-7421

AGENT: MR. BUILDER LTD  
ADDRESS: T-297 COUNTY ROAD 15  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-598-8620

USE TYPE - RESIDENTIAL:

OTHER:

ZONING INFORMATION

DIST: R-3 LOT DIM: 78X107 AREA: 8346 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: 58' WIDTH: 41' STORIES: 1 LIVING AREA SF: 1482  
GARAGE AREA SF: 497 HEIGHT: 18' BLDG VOL DEMO PERMIT:

WORK DESCRIPTION  
NEW HOME

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

|                   |        |
|-------------------|--------|
| BUILDING PERMIT   | 221.00 |
| ELECTRICAL PERMIT | 100.00 |
| PLUMBING PERMIT   | 45.00  |
| MECHANICAL PERMIT | 24.00  |
| WATER TAP PERMIT  | 655.00 |
| SEWER PERMIT      | 60.00  |

*only hung this file*

TOTAL FEES DUE 1105.00

08-16-02  
-----  
DATE

*Mah A. Kahr*  
-----  
APPLICANT SIGNATURE



**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 ~~2/16/00~~ \_\_\_\_\_

JOB LOCATION 545 Cambridge St

LOT 26 Picket Fence  
 (Subdivision or Legal Description)

ISSUED BY \_\_\_\_\_  
 (Building Official)

OWNER Kruvial PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

AGENT Mr Builder PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

USE: ( ) Residential ( ) Commercial ( ) Industrial  
 ( ) Other \_\_\_\_\_

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

ESTIMATED COST = \$ 92,000

|                | <u>Base</u>      | <u>Plus</u>     | <u>Total</u>     |
|----------------|------------------|-----------------|------------------|
| ( ) Building   | \$ _____         | \$ _____        | \$ <u>221.00</u> |
| ( ) Electrical | \$ _____         | \$ _____        | \$ <u>100.00</u> |
| ( ) Plumbing   | \$ <u>9.00</u>   | \$ <u>36.00</u> | \$ <u>45.00</u>  |
| ( ) Mechanical | \$ <u>18.00</u>  | \$ <u>6.00</u>  | \$ <u>24.00</u>  |
| ( ) Demolition | \$ _____         | \$ _____        | \$ _____         |
| ( ) Zoning     | \$ _____         | \$ _____        | \$ _____         |
| ( ) Sign       | \$ _____         | \$ _____        | \$ _____         |
| (X) Water Tap  | \$ <u>650.00</u> | \$ <u>5.00</u>  | \$ <u>655.00</u> |
| (X) Sewer Tap  | \$ _____         | \$ _____        | \$ <u>60.00</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>78x107</u>   | <u>8346</u>     | <u>25'</u> | <u>7</u>                         | <u>15</u> |
| Max Height | No. Pkg. Spaces | No. Lqg. Spaces | Max Cover  | Petition or Appeal Required-Date |           |
| <u>45'</u> | <u>2</u>        |                 | <u>45%</u> |                                  |           |

**WORK INFORMATION**

Building: Ground Floor Area 1482 sq. ft. Basement Floor Area N/A sq. ft.  
 Garage Floor Area 497 sq. ft. 2nd Floor Area \_\_\_\_\_ sq. ft. Other Porch 86 sq. ft.  
 Size: Length 58 Width 41 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 ( ) No  
Size of Service 200 Underground  Overhead \_\_\_\_\_ Number of New Circuits 35

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 = 1 Lavatories = 3 Kitchen Sinks = 1 Disposal = 1  
Clothes Washer = 1 Floor Drains = \_\_\_\_\_ Dishwasher = 1 Other \_\_\_\_\_ Total = 12

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.

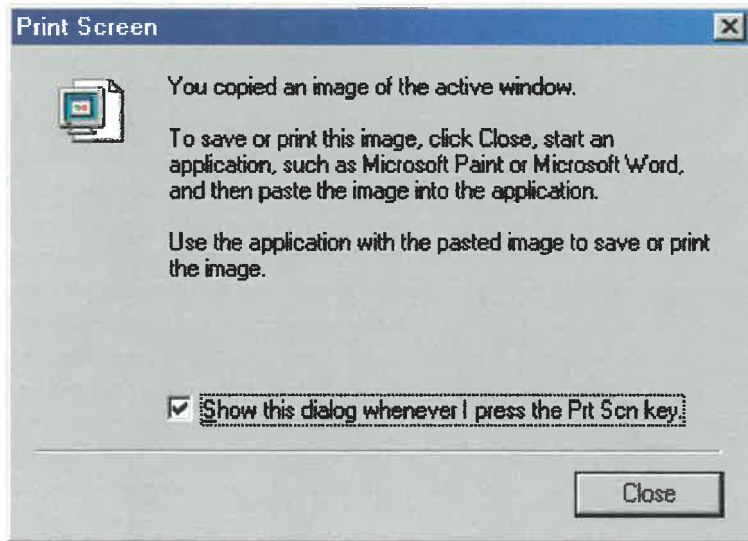
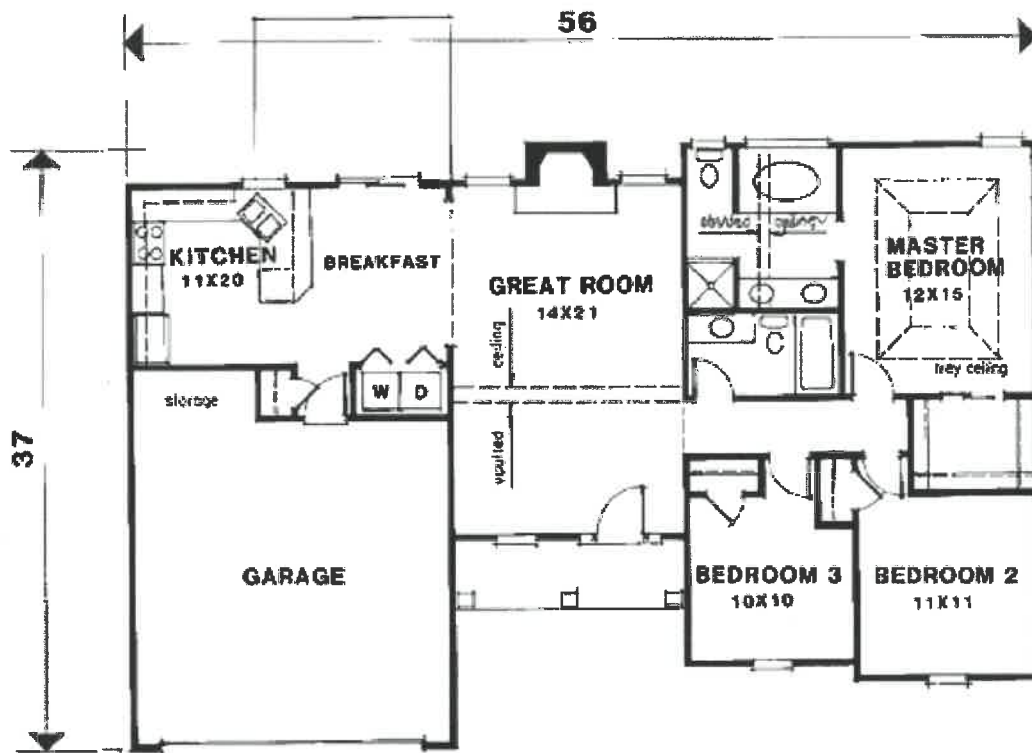
**READ AND SIGN BELOW:** The undersigned hereby makes application for a Permit for all work described herein and agrees to complete the work in strict accordance with all applicable provisions of the current edition of the C.A.B.O. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

Signature of Applicant Mali A. Kahl Date 08-14-02

### Home Plans

[Close](#)

House Plan 9268 - [Front Elevation](#) - Main Floor

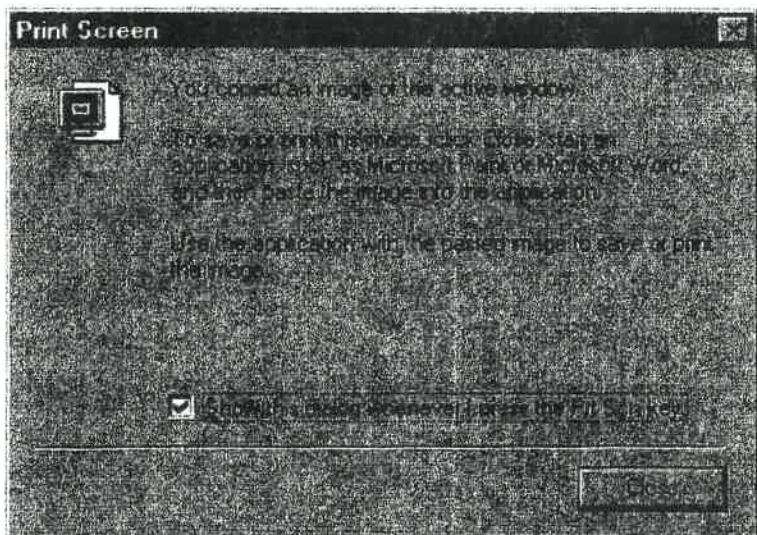
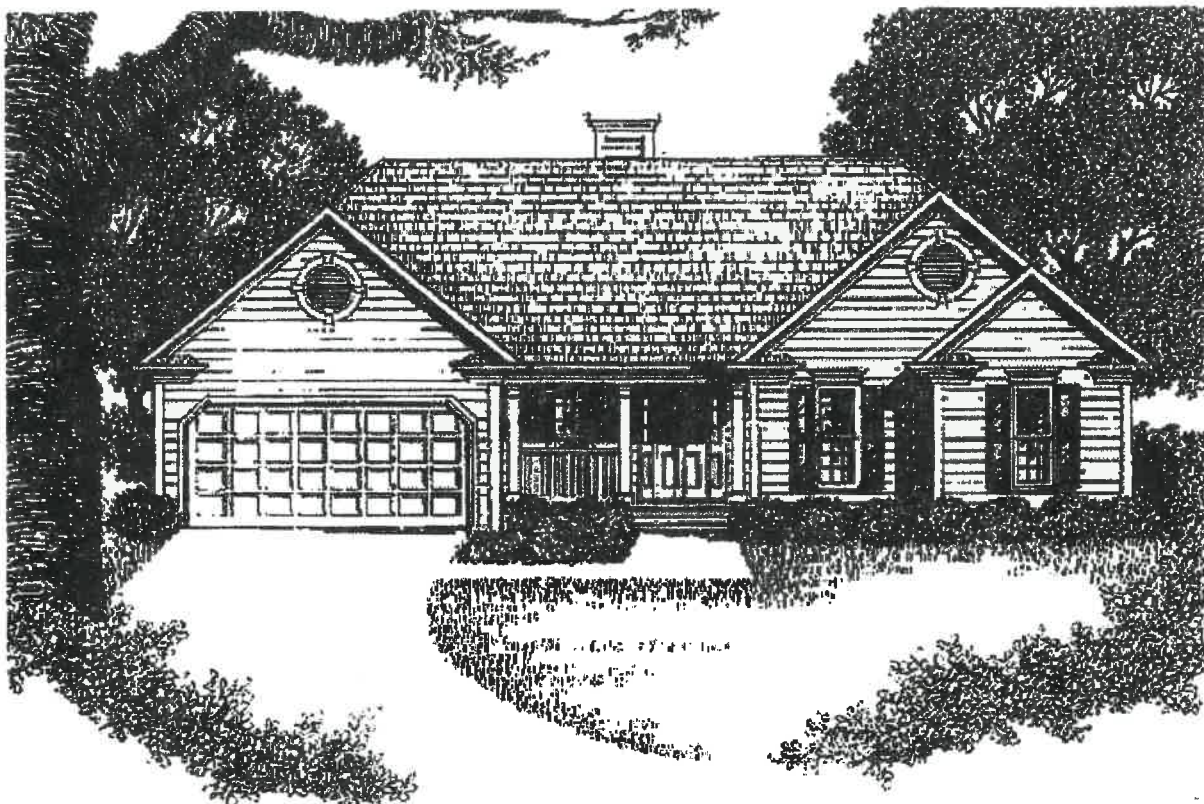




### Home Plans

[Close](#)

House Plan 9268 - Front Elevation - [Main Floor](#)







CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1233

DATE ISSUED: 07-17-2002

JOB LOCATION: 545 CAMBRIDGE ST

OWNER: KURIVIAL, MIKE

OWNER PHONE: 419-782-7421

CONTRACTOR: MR. BUILDER LTD

CONTRACTOR PHONE: 419-598-8620

WORK DESCRIPTION: NEW HOME

PLUMBING: UNDGR \_\_\_\_\_ RGHIN 7-16-02 FINAL \_\_\_\_\_

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

MECHANICAL: UNDGR \_\_\_\_\_ RGHIN 7-16-02 FINAL \_\_\_\_\_

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

ELECTRICAL: UNDGR \_\_\_\_\_ RGHIN 7-16-02 FINAL \_\_\_\_\_

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

BUILDING: SITE \_\_\_\_\_ FTG 7-2 FNDDT 7-2

STRUC 7-16-02 ROOF 7-16-02 EXT \_\_\_\_\_

VENT \_\_\_\_\_ ACCES \_\_\_\_\_ EGRS \_\_\_\_\_

SMKDT \_\_\_\_\_ FINAL \_\_\_\_\_

ISSUE TEMP OCCUP \_\_\_\_\_ ISSUE OCCUP 2-10-03

STRG SHED: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

SIGN: FTG \_\_\_\_\_ FINAL \_\_\_\_\_

FENCE: SITE \_\_\_\_\_ FINAL \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INSPECTOR INITIALS: \_\_\_\_\_

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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 #: 1233

ISSUED: 07-17-2002

JOB LOCATION: 545 CAMBRIDGE ST

WORK DESCRIPTION: NEW HOME

OWNER: KURIVIAL, MIKE

ADDRESS: 606 1/2 1ST ST DEFIANCE, OH 43512

OWNER PHONE: 419-782-7421

-----  
CONTRACTOR: MR. BUILDER LTD

ADDRESS: T-297 COUNTY ROAD 15 NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-598-8620

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

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

SIZE OF SERVICE 100AMP \_\_\_\_\_ 150AMP \_\_\_\_\_ 200AMP  X  400AMP \_\_\_\_\_ 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 #: 1233

ISSUED: 07-17-2002

JOB LOCATION: 545 CAMBRIDGE ST

OWNER: KURIVIAL, MIKE

PHONE: 419-782-7421

ADDRESS: 606 1/2 1ST ST DEFIANCE, OH 43512

-----  
CONTRACTOR: MR. BUILDER LTD

ADDRESS: T-297 COUNTY ROAD 15 NAPOLEON, OH 43545

PHONE: 419-598-8620

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 DC VA

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

