PERMIT

CITY OF NAPOLEON 255 W. RIVERVIEW AVE NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING PH (419) 592-4010

FAX (419) 599-8393

PERMIT NO: 960002 DATE ISSUED: 11-14-96 ISSUED BY: BND

JOB LOCATION: 1165 CHESTERFIELD DR

EST. COST: 20000.00

LOT #:

SUBDIVISION NAME: TWIN OAKS 1ST

OWNER: SMITH, KEVIN

AGENT: WINAMEG CONTRACTORS

ADDRESS: 1165 CHESTERFIELD DR ADDRESS: 6500 US HWY 20A CSZ: NAPOLEON, OH 43545 CSZ: DELTA, OH 43515

PHONE: 419-592-6678

PHONE: 419-822-4309

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: R-1 LOT DIM: AREA: FYRD: 40 SYRD: 15 RYRD: 15

MAX HT: 45 # PKG SPACES: 2 # LOADING SP:

MAX LOT COV: 35%

BOARD OF ZONING APPEALS:

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

WORK INFORMATION

SIZE - LGTH: 22' WIDTH: 24' STORIES: 1 LIVING AREA SF:

GARAGE AREA SF: 483 HEIGHT: 20 BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

TWO CAR ATTACHED GARAGE

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

BUILDING PERMIT ELECTRICAL PERMIT

77.00 18.00

PLUMBING PERMIT

6.00

11-15-96 BMB

TOTAL FEES DUE 101.00



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BUILDING PERMIT ELECTRICAL PERMIT PLUMBING PERMIT

TOTAL FEES DUE

DATE

APPLICANT SIGNATURE

	6

CITY OF NAPOLEON INSPECTION FORM

January 22, 1997 PERMIT #: 960002 JOB LOCATION: 1165 CHESTERFIELD DR OWNER: SMITH, KEVIN WORK DESCRIPTION: TWO CAR ATTACHED GARAGE / Winemag PLUMBING: UNDGR ____ RGHIN ___ FINAL ____ MECHANICAL: UNDGR ____ RGHIN ___ FINAL ____ ELECTRICAL: UNDGR ____ FINAL ____ BUILDING: SITE 1/-15-96 FTG 1/-15-96 FNDT 1/-15-96 STRUC ____ ROOF ___ EXT ___ VENT ___ ACCESS _____SMKDT ____FINAL 2-6-97 occp _____ MISC INSP: NOTES:

APPLICATION FOR

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FRCM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO.		Base	Plus	Total
PERMIT NO. 4090 ISSUED 10-18-96	(X)Building	9.00	147	\$ 81.00
JOB LOCATION 1165 chester field	(X)Electrical	\$		\$ 12.00
LOT	(V)Plumbing	\$		6,00
(Subdivision or Legal Description)			4_0.00	10,00
ISSUED BY	()Mechanical	\$	_ \$	- !
(Building Official)	()Demolition	\$	\$	\$
OWNER Kevin Smith PHONE 335-8440	()Zoning	\$. \$	\$
ADDRESS 14274 Ca. Rd. B Wayson 43567	()Sign	\$	\$	\$
AGENT Dack Lawrence PHONE 337-1165	()Water Tap	\$	\$. \$
ADDRESS 19291 Co. Rd. J Wayson	()Sewer Tap	\$	\$. \$
USE:	()Temp Water	\$. \$	\$
WORK: () New () Addition () Replacement () Remodel	()Temp Elec.	\$	\$	\$
ESTIMATED COST = \$ 22,000.00	Additional Plan Review:	Structure Electric	Hours _	
ZONING INFORMATION	TOTAL FEES Less Fees BALANCE DUE	s Paid		99.00
District Lot Dimensions Area	Front Ya	rd Side	Yard R	ear Yard
			 ,	
Max Height No. Pkg. Spaces No. Ldg. Spaces	Max Cove	r Petiti	on or Appeal	Required-Date
		=:		
WORK INFORMATION				
Building: Ground Floor Area sq. ft.	Basement Floor A	rea	sq. ft	•
Garage Floor Area sq. ft. 2nd Floor Area	sq. ft. 0	ther		sa. ft.
Size: Length 22' Width 24' Stories	Height	17'		
Building Volume (for Demolition Permit) cubic feet				
Building Volume (for Demolition Permit) cubic feet Attached Description of Nork: addition				
9				
				3

ELECTRICAL:	Contractor	Phone
	Address	ESTIMATED COST = \$
Type of Work:	()New ()Service Change ()Rewiring ()Add'l Wiring TEMPORAR	Y ELEC. REQUIRED - ()Yes ()No
	Size of Service Underground Overhead	Number of New Circuits 4
Description of	Work:	
PLUMBING:	Contractor	Phone
	Address	ESTIMATED COST = \$
WATER TAP REQU	IRED - ()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 TI	AP REQUIRED - ()Yes ()No Type of Pipe STREET TO	O BE OPENED - ()Yes ()No
	Main Building Drain Size = Main Ven	t Pipe Size =
LIST NUMBER OF	PLUMBING FIXTURES BELOW:	
Water Closets :	Bathtubs = Showers = Lavatories = Kitch	en Sinks = Disposal =
Clothes Washer	= Floor Drains = Other	Total =
Description of	Nork:	
MECHANICAL:	Contractor1	Phone
8	Address ESTIMATE) 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) Pipe	es ()Series Loop
ELECTRIC HEAT -	Number of Circuits Number of Furnaces Number	e of Hot Air Runs
Number of Hot W	later Radiators Total Heat Loss Rated Capacity	of Furnace/Boiler
LOCATION OF HEA	TING UNITS - ()Crawl Space ()Floor Level ()Attic ()Suspend	ded ()Roof ()Outside
Description of	Work:	
Foundation Plan Electrical Layor	ED: All applications must be accompanied by two (2) complete sets of s, Floor Plans, Structural Framing Plans, Exterior Elevations, Section ut, Plumbing Isometric, Heating Layout, etc. All Plans shall be drawn e Site Plans, and show electric panel and furnace locations.	on and Details, Stair Details,
to complete the Building Code,	ELOW: The undersigned hereby makes application for a Permit for all work in strict accordance with all applicable provisions of the currentee Napoleon Building and Zoning Codes, the Napoleon Engineering Depaircations and other pertinent sections of the Napoleon Code of Ordinan	ent edition of the C.A.B.O. The interpretation of the C.A.B.O. The interpretation of the C.A.B.O.
Signature of App	plicant	Date