

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

Permit No. 2545 Issued 1-27-92

Job Location 651 Clairmont
 Lot _____
 Issued by Brent N. Damman
 Owner NW Ohio Community Action Comm.
 Address 1933 E. Second St., Defiance
 Agent Deborah A. Bowen
 Address _____
 Use Type - Residential
 Other - Describe Preschool classroom
 No. Dwelling Units _____
 New xx Replacement _____
 Add'n. Alter Remodel
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 98,000.00

FEE'S	BASE	PLUS	TOTAL
<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Water Tap	\$ <u>375.00</u>	\$ _____	\$ <u>375.00</u>
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<input type="checkbox"/> Temp. Water	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Temp. Elec.	\$ <u>10.00</u>	\$ _____	\$ <u>10.00</u>
TOTAL FEES.....			\$ <u>495.00</u>
LESS FEES PAID. 1-27-92....			\$ <u>495.00</u>
BALANCE DUE.....			\$ <u>0.00</u>

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: New Preschool.

PAID
 JAN 27 1992
 CITY OF NAPOLEON

Date 1/30/92 Applicant Signature _____

INSPECTION RECORD

UNDERGROUND			ROUGH-IN						FINAL		
Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
PLUMBING	Building Drains		Drainage, Waste & Vent Piping			Indirect Waste			Drainage, Waste & Vent Piping		
	Water Piping								Backflow Prevention		
	Building Sewer		Water Piping			Condensate Lines			Water Heater		
	Sewer Connection								FINAL APPROVAL		
MECHANICAL	Refrigerant Piping		Refrigerant Piping			Chimney(s)			Grease Exhaust System		
			Duct Furnace(s)			Fire Dampers			Air Cond. Unit(s)		
	Ducts/Plenums		Ducts/Plenums			<input type="checkbox"/> Radiant Htr(s) <input type="checkbox"/> Unit Htr(s)			Refrigeration Equipment		
			Duct Insulation			Pool Heater			Furnace(s)		
			Combustion Products Vents			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.			FINAL APPROVAL		
ELECTRICAL	Conduits & or Cable		Conduits/Cable			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			Temp Service Temp Lighting		
	Grounding & or Bonding		Rough Wiring			<input type="checkbox"/> Generator(s) <input type="checkbox"/> Motors			Fixtures Lampholders		
	Floor Ducts Raceways		Service Panel Switchboard			<input type="checkbox"/> Water Htr <input type="checkbox"/> Welder			Signs		
	Service Conduit		Busways Ducts			<input type="checkbox"/> Heaters <input type="checkbox"/> Heat Cable			Electric Mtr. Clearance		
	Temporary Power Pole		Subpanels			<input type="checkbox"/> Duct Htr(s) <input type="checkbox"/> Furnace(s)			FINAL APPROVAL		
BUILDING	Location, Set-backs, Esmt(s)		Exterior Wall Construction			Roof Covering Roof Drainage			Smoke Detector		
	Excavation					Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing					<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab		Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls		Columns & Supports			Fireplace Chimney					
	Sub-soil Drain		Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access					
	Piles		Floor System(s)						FINAL APPROVAL BLDG. DEPT.		
		Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued			
FINAL	INSPECTIONS, CORRECTIONS, ETC.					INSPECTIONS, CORRECTIONS, ETC.					

APPLICATION
for
RESIDENTIAL, BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS AND DEMOLITION
from the
CITY OF NAPOLEON - BUILDING DEPARTMENT
255 West Riverview Avenue, Napoleon, Ohio 43545 - Phone 419-592-4010

Entry No. _____ Permit No. <u>2545</u> Issued <u>1-27-92</u> Job Location <u>651 Clairmont</u> Lot _____ sub-div or legal description _____ Issued by <u>BND</u> Building Official <u>NORTHWESTERN OHIO COMMUNITY</u> Owner <u>ACTION COMMISSION</u> Phone <u>784-2150</u> Address <u>1933 E. SECOND ST., DEFIANCE, OH</u> Agent <u>DEBORAH A. BOWEN</u> Phone <u>784-2150</u> Address <u>same as owner</u> Description of Use <u>PRESCHOOL CLASSROOMS</u> Residential _____ (number dwelling units) Commercial <u>1</u> Industrial _____ New _____ New <u>1</u> Addition _____ Replacement _____ Remodel _____ Mixed Occupancy _____ Change of Occupancy _____ Estimated Cost: \$ <u>98,000.00</u>	<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><u>BASE</u></td> <td style="text-align: center;"><u>PLUS</u></td> <td style="text-align: center;"><u>TOTAL</u></td> </tr> <tr> <td>Building</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Electrical</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Plumbing</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Mechanical</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Demolition</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Zoning</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td>Sign</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Water Tap</td> <td>\$ <u>560.00</u></td> <td>\$ <u>560.00</u></td> </tr> <tr> <td><input checked="" type="checkbox"/> Sewer Tap</td> <td>\$ <u>100.00</u></td> <td>\$ <u>100.00</u></td> </tr> <tr> <td>Temp Water</td> <td>\$ _____</td> <td>\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Temp Elec.</td> <td>\$ <u>10.00</u></td> <td>\$ <u>10.00</u></td> </tr> <tr> <td>Additional Structure</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Plan</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Review</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>TOTAL FEES</td> <td>-----</td> <td>\$ <u>680.00</u></td> </tr> <tr> <td>Less Fees Paid (date) <u>1-27-92</u></td> <td>\$ <u>495.00</u></td> <td></td> </tr> <tr> <td>BALANCE DUE</td> <td>-----</td> <td>\$ <u>185.00</u></td> </tr> </table>	<u>BASE</u>	<u>PLUS</u>	<u>TOTAL</u>	Building	\$ _____	\$ _____	Electrical	\$ _____	\$ _____	Plumbing	\$ _____	\$ _____	Mechanical	\$ _____	\$ _____	Demolition	\$ _____	\$ _____	Zoning	\$ _____	\$ _____	Sign	\$ _____	\$ _____	<input checked="" type="checkbox"/> Water Tap	\$ <u>560.00</u>	\$ <u>560.00</u>	<input checked="" type="checkbox"/> Sewer Tap	\$ <u>100.00</u>	\$ <u>100.00</u>	Temp Water	\$ _____	\$ _____	<input checked="" type="checkbox"/> Temp Elec.	\$ <u>10.00</u>	\$ <u>10.00</u>	Additional Structure	_____	_____	Plan	_____	_____	Review	_____	_____	TOTAL FEES	-----	\$ <u>680.00</u>	Less Fees Paid (date) <u>1-27-92</u>	\$ <u>495.00</u>		BALANCE DUE	-----	\$ <u>185.00</u>
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ZONING INFORMATION:

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard
Max. Hgt.	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition or Appeal Required/Date	

WORK INFORMATION:

Building - Garage Floor Area _____ Basement Floor Area _____ 2nd Floor Area _____

Size - Length _____ Width _____ Stories _____ Ground Floor Area _____

Height _____ Building Volume (For Demolition Permit) _____ cubic feet

Description of Work: New Preschool

ELECTRICAL: Electrical Contractor _____ Phone _____

Address _____ Estimated Cost: \$ _____

Type of Work: New _____ Service Change _____ Rewiring _____ Add'l. Wiring _____ Temp. Electric Required: Yes _____ No _____

Size of Service _____ Underground _____ Overhead _____ Number of New Circuits _____

Description of Work: _____

PLUMBING: 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 _____

St. Sewer Tap Req.: Yes _____ No _____ Size _____ 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 _____ Dishwasher _____

Clothes Washer _____ Floor Drains _____ Other (Fixtures/Type): _____

Description of Work: _____

MECHANICAL: 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 Pipe _____ Two Pipe _____ Series Loop _____)

Electric Heat: (No. of Circuits _____) No. of Furnaces _____ No. of Hot Air Runs _____

No. 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 set 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 also, 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.

Dated: _____ Signature of Applicant _____

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Date 1/30/92 Applicant Signature Deborah A. Bowen **PAID** Executive Director

JAN 27 1992

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 784-2150

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 OH 43512

Agent Deborah A. Bowen 784-2150

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Use Type - Residential

Other - Describe Preschool classroom

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CITY OF NAPOLEON

