

# THE CITY OF NAPOLEON

## BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

### Electrical Permit

Page 1 of 1

Permit Number: EL2005-32

Printed: 6/7/2005

### Property Address:

**920 Clairmont Ave.**

**Applicant** D.S. Nickels Inc.

**Approval Date:** 6/7/2005

**Address:** J465 Co Rd 15

Napoleon, OH 43545

**Phone:** 419-264-0300

419 409 1615

### Owners

**Name:** Mr. Dave Schlade

**Phone:** 419-599-8430

**Address:** 920 Clairmont Ave

**Contractors** D.S. Nickels Inc.

**Address:** J465 Co Rd 15

Napoleon, OH 43545

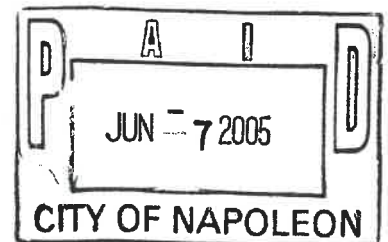
**Phone** 419-264-0300

### Fees and Receipts:

Number	Description	Amount
FEE2005-469	electrical	\$15.00

**Total Fees:** \$15.00

**Description of work to be done:** moving meter base to another wall, overhead



**Applicant signature:** Dave Schlade

**Date:** 6-8-05





# 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 # EL2005-32**

**Date Issued: 06/07/05**

**Job Location: 920 Clairmont Ave**

**Work Description** Moving base to another wall

**Owner: Dave Schlade**

**Address: 920 Clairmont Ave**

**Owner Phone: 419-599-8430**

**Contractor : D. S. Nickels**

**Contractor Phone: 419-264-0300**

Electric Service Upgrade:  New Service Installation: \_\_\_\_\_

Industrial: \_\_\_\_\_ Commercial: \_\_\_\_\_ Residential:  1 Phase: \_\_\_\_\_ 3 Phase: \_\_\_\_\_

**Size of Service:** 100 Amp:  150 Amp: \_\_\_\_\_ 200 Amp: \_\_\_\_\_ 400 Amp: \_\_\_\_\_ Other: \_\_\_\_\_

**Hub Size:** 1 1/4" \_\_\_\_\_ 1 1/2" \_\_\_\_\_ 2"

**Desired Voltage:** 120/240:  Other: \_\_\_\_\_

Underground Service: \_\_\_\_\_ Overhead Service:

Date Completed: \_\_\_\_\_ Approved By: \_\_\_\_\_

Old Meter Number: \_\_\_\_\_ New Meter Number: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS, REMODELING.

DATE: 6-8-05 JOB LOCATION: 920 Clavemont

OWNER: Dave Schlade PHONE: 599-8430

OWNER ADDRESS: 920 Clavemont Ave CITY: Napoleon ZIP: 43545

CONTRACTOR: DS Nickels PHONE: 264-0300

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES: \_\_\_\_\_ NO: \_\_\_\_\_

Is any of this job going to be subcontracted out? Yes: \_\_\_\_\_ No: X

If yes to whom: \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: move meter and mast around corner of house

## PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- |  |  |
|--|--|
| <input type="checkbox"/> A/C ADD ON                            | <input type="checkbox"/> REMODELING              |
| <input type="checkbox"/> BOILER REPLACEMENT                    | <input type="checkbox"/> ROOFING                 |
| <input type="checkbox"/> CURBING                               | <input type="checkbox"/> SEWER REPAIRS**         |
| <input type="checkbox"/> DECKS *                               | <input type="checkbox"/> SIDEWALK*               |
| <input type="checkbox"/> DRIVEWAY*                             | <input type="checkbox"/> SIDING                  |
| <input checked="" type="checkbox"/> ELECTRICAL SERVICE UPGRADE | <input type="checkbox"/> STORAGE SHED*           |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW                | <input type="checkbox"/> SWIMMING POOL*          |
| <input type="checkbox"/> FENCE*                                | <input type="checkbox"/> FURNACE REPLACEMENT     |
| <input type="checkbox"/> ADDITIONS*                            | <input type="checkbox"/> TEMP ELECTRIC           |
| <input type="checkbox"/> FURNACE NEW                           | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER                            | <input type="checkbox"/> WINDOWS                 |
| <input type="checkbox"/> PLUMBING                              | <input type="checkbox"/> ZONING                  |

\*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

\*\* IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE.

## PERMIT COST WORKSHEET

JOB	BASE FEE	TOTAL
SIDING (only) TOTAL SQ _____ X 1.00 +	\$5.00 =	\$ _____
ROOFING (only) TOTAL SQ _____ X 1.00 +	\$5.00 =	\$ _____
WINDOWS (only) # OF WINDOWS ___ X 1.00 +	\$5.00 =	\$ _____
ELECTRICAL # OF CIRCUITS _____ X 3.00 +	\$15.00 =	\$ _____
ELECTRICAL SERVICE UPGRADE	\$15.00 =	\$ <u>15.00</u>
PLUMBING (INSIDE) repairs only	\$10.00 =	\$ _____
PLUMBING/SEWER (OUTSIDE)	\$25.00 =	\$ _____
WATER HEATER	\$5.00	\$ _____
SHED UNDER 200 SQ FT	\$ 5.00	\$ _____
FURNACE OR A/C (REPLACEMENT)	\$ 5.00	\$ _____
DEMOLITION (only)	\$30.00	\$ _____
SIDEWALK REPLACEMENT/ NEW	\$25.00	\$ _____
DRIVEWAY	\$25.00	\$ _____

ALL CONSTRUCTION, ALTERATIONS, REMODELING, SHEDS, DECKS & FENCES NOT LISTED ABOVE IS BASED ON COST OF WORK BEING PERFORMED.

COST OF WORK \$ \_\_\_\_\_ (SEE CHART) \$ \_\_\_\_\_

0.00	-	250.00	0.00	11,000.00	-	11,999.00	25.00
250.00	-	1,000.00	10.00	12,000.00	-	12,999.00	26.00
1,000.00	-	1,999.00	12.00	13,000.00	-	13,999.00	27.00
2,000.00	-	2,999.00	14.00	14,000.00	-	14,999.00	28.00
3,000.00	-	3,999.00	16.00	15,000.00	-	15,999.00	29.00
4,000.00	-	4,999.00	18.00	16,000.00	-	16,999.00	30.00
5,000.00	-	5,999.00	19.00	17,000.00	-	17,999.00	31.00
6,000.00	-	6,999.00	20.00	18,000.00	-	18,999.00	32.00
7,000.00	-	7,999.00	21.00	19,000.00	-	19,999.00	33.00
8,000.00	-	8,999.00	22.00	20,000.00	-	20,999.00	34.00
9,000.00	-	9,999.00	23.00	21,000.00	-	21,999.00	35.00
10,000.00	-	10,999.00	24.00	22,000.00	-	22,999.00	36.00
				Over 22,999		Please Call	

# City of Napoleon

**BUILDING & ZONING DEPARTMENT**

**255 W Riverview**

**(419)592-4010**

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## Inspection Record

**Inspection #:** INSP2005-160

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Printed: 7/1/2005

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**Address:** 920 Clairmont Ave.  
Napoleon, OH 43545

**Reference #:** EL2005-32

**Applicant:** Mr. Dave Schlade

**Directions To Parcel:**

**Inspection Type:** Electric Final

**Date:** 6/21/2005

**Inspector:** Tom

**Status:** Complete

**Passed?**

**Required Steps:**

**Comments:** oked service upgrade

### Inspection Checklist:

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### Corrections:

**Correction Code:**

**Date:**

**Correction Description:**

**Status:**

**Correction Made Date:**

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### Conditions:

**Condition Code:**

**Description:**

**Date:**

**Department:**

**Status:**

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### Other Fields:

