

**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**  
 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01445 Issued 9-8-87 date

Job Location 226½ E. Clinton address

Lot 126 Stafford's 2nd Addition sub-div or legal discript

Issued By Eldon Huber building official

Owner James Tonjes 592-6731 name tel.

Address 910 Hobson St.

Agent James Tonjes 592-6731 builder-eng.-etc. tel.

Address 910 Hobson St.

Description of Use Residence

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Residential 2 no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel X

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 5,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	25.75	31.75
<input checked="" type="checkbox"/> ELECTRICAL	10.00	12.00	22.00
<input checked="" type="checkbox"/> PLUMBING	6.00	10.00	16.00
<input checked="" type="checkbox"/> MECHANICAL	12.00		12.00
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. <u>      </u> hrs	Elect. <u>      </u> hrs	
TOTAL FEES.....			81.75
LESS MIN. FEES PAID			
BALANCE DUE.....			

**ZONING INFORMATION**

district <u>C</u>	lot dimensions <u>69.3' x 112'</u>	area <u>7761 S.F.</u>	front yd <u>28'</u>	side yds <u>R-8.3'</u>	rear yd <u>37'</u>
max hgt <u>35'</u>	no pkg spaces <u>2 - min.</u>	no ldg spaces	max cover <u>45%</u>	petition or appeal req'd	date appr

**WORK INFORMATION:**

Size: Length 13' Width 8' Stories \_\_\_\_\_ Deck \_\_\_\_\_  
 Ground Floor Area 104 S.F.

Height \_\_\_\_\_ Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Electrical: \_\_\_\_\_

Plumbing: Replace existing bath & plumbing links and laundry. brief description

Mechanical: New furnace & ductwork 9-H.A. Runs brief description

Sign: \_\_\_\_\_ Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_

Additional Information: Remodel 2nd floor add landing to bottom of 2nd floor stair and add wood deck to rear. Relocate doors on 2nd floor and remove closet w

Date 1-13-88 Applicant Signature Jerry L. Tonjes owner-agent

**PAID**  
**JAN 13 1988**

**CITY OF NAPOLEON**

# INSPECTION RECORD

UNDERGROUND			ROUGH-IN						FINAL			
Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By	
<b>PLUMBING</b>	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			
<b>MECHANICAL</b>	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			
<b>ELECTRICAL</b>	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			
<b>BUILDING</b>	Location, Set-backs, Esmt(s)	9/8	F4	Exterior Wall Construction			Roof Covering Roof Drainage		Smoke Detector	*	8/8	
	Excavation	9/8	F4				Exterior Lath		Demolition (sewer cap)			
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction	12/29	F4	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.		8/7	
				Roof System			Special Insp Reports Rec'd		Certificate of Occupancy Issued		8/7	
<b>ADDITIONAL</b>	<b>INSPECTIONS, CORRECTIONS, ETC.</b>					<b>INSPECTIONS, CORRECTIONS, ETC.</b>						
	DECK OK				9/8	F4	ADD BRN DETECTOR IN HALLWAY EXIST. ONE LOCATED IN MASTER BEDROOM				8/8	F4
	RANDOM INSP				12/29	F4						



RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON  
 255 West Riverview Ave.  
 Napoleon, Ohio 43545  
 619/592-4010

ADDENDUM TO Permit No. 01445 - (1)  
 Owner JAMES TOWNES  
 Contractor SELF  
 Location 226112 E. CLINTON

Please note the items checked below and incorporate them into your plans as indicated:  PERMIT NOT ISSUED, CORRECT PLANS AND RE-SUBMIT.  PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL			
<input checked="" type="checkbox"/>	Provide approved smoke detector(s) as req'd.		Show size of members supporting porch roof.
	Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.		Provide double top plate for all bearing partitions and exterior walls.
	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)		Provide design data for prefab wood truss.
	Submit fully dimensioned plot plan.		Ceiling joists undersized in _____
<input checked="" type="checkbox"/>	Provide min. of 1-3'0" x 6'8" exit door.		Roof rafters undersized in _____
	Provide min. 22" x 30" attic access opening.		PLUMBING AND MECHANICAL
	Provide min. 18" x 24" crawl space access opening.	<input checked="" type="checkbox"/>	Terminate all exhaust systems to outside air.
	Provide approved sheathing or flashing behind masonry veneer.	<input checked="" type="checkbox"/>	Insulate ducts in unheated areas.
<input checked="" type="checkbox"/>	Provide min. 15# underlayment on roof.	<input checked="" type="checkbox"/>	Provide backflow prevention device on all hose bibs.
	Provide adequate fireplace hearth.	<input checked="" type="checkbox"/>	Terminate pressure and temperature relief valve drain in an approved manner.
	Install factory built fireplaces/stoves according to manufacturers instructions.		Provide dishwasher drain with approved air gap device.
	Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.		METAL VENEERS
	LIGHT AND VENTILATION		Contact City Utilities Dept. to remove conductors and/or meter.
<input checked="" type="checkbox"/>	Provide mechanical exhaust or window in bathroom _____		Provide approved system of grounding and bonding.
	Provide min. _____ Sq. In. net free area attic ventilation.		ELECTRICAL
	Provide min. _____ Sq. In. net free area crawl space ventilation.		Show location of service entrance panel and service equipment panel.
	FOUNDATION		G. F. C. I. req'd. on temporary electric.
<input checked="" type="checkbox"/>	Min. depth of foundation below finished grade is 32".	<input checked="" type="checkbox"/>	Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.
<input checked="" type="checkbox"/>	Min. size of footer <u>12</u> " x <u>6</u> ".	<input checked="" type="checkbox"/>	Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.
<input checked="" type="checkbox"/>	Provide anchor bolts, 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.	<input checked="" type="checkbox"/>	Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.
	Show size of basement columns.		INSPECTIONS
	FRAMING		The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.
	Show size of wood girder in _____	<input checked="" type="checkbox"/>	Footers and Setbacks.
	Provide design data for structural member in _____	<input checked="" type="checkbox"/>	Foundation.
	Floor joists undersized in _____	<input checked="" type="checkbox"/>	Plumbing rough-in.
	Provide double joists under parallel bearing partitions.	<input checked="" type="checkbox"/>	Plumbing final.
<input checked="" type="checkbox"/>	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.		Electrical service.
	Show size of headers for openings over 4' wide _____	<input checked="" type="checkbox"/>	Electrical rough-in.
		<input checked="" type="checkbox"/>	Electrical final

Additional Corrections. THE STAIRWAY ADDITION WILL REQUIRE A 12" WIDE FOOTING 32" DEEP, FURNISH A HEATING LAYOUT, PROVIDE SECTION THRU DECK AND SECTION THRU ENTRANCE WALL.

Approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No 01445 and made a part thereof. DATE APPROVED OR DISAPPROVED 9-8-87 Checked by ELDON HUBER Plan Examiner.

DATE RECHECKED AND APPROVED \_\_\_\_\_ Checked by \_\_\_\_\_

100

100

100

100

**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

01445

Permit No.                      Issued 9-2-87  
date

Job Location 226 1/2 E. CLINTON  
address

Lot 126 STAFFORD'S 2ND ADD  
sub-div or legal discript

Issued By 54  
building official

Owner JAMES TOWNES 592-6731  
name tel.

Address 910 HOBSON ST.

Agent JAMES TOWNES 592-6731  
builder-eng.-etc. tel.

Address 910 HOBSON ST.

Description of Use RESIDENCE

Residential 2  
no. dwelling units

Commercial                      Industrial                     

New                      Add'n.                      Alter                      Remodel X

Mixed Occupancy                     

Change of Occupancy                     

Estimated Cost \$ 5000.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	25.75	31.75
<input checked="" type="checkbox"/> ELECTRICAL	10.00	12.00	22.00
<input checked="" type="checkbox"/> PLUMBING	6.00	10.00	16.00
<input checked="" type="checkbox"/> MECHANICAL	12.00	1.00	12.00
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. <u>                    </u> hrs	Elect. <u>                    </u> hrs	
TOTAL FEES.....			81.75
LESS MIN. FEES PAID <u>                    </u>			
BALANCE DUE.....			

**ZONING INFORMATION**

district <u>C</u>	lot dimensions <u>69.3' x 112'</u>	area <u>7761 S.F.</u>	front yd <u>28'</u>	side yds <u>R-8.3'</u>	rear yd <u>37'</u>
max hgt <u>35'</u>	no pkg spaces <u>2-MIN</u>	no ldg spaces	max cover <u>45%</u>	petition or appeal req'd	date appr

**WORK INFORMATION:**

Size: Length 131' Width 8' Stories                      Ground Floor Area DECK 169 S.F.

Height                      Building Volume (for demo. permit)                      cu. ft.

Electrical:                       
brief description

Plumbing: REPLACE EXISTING BATH + PLUMBING, LINES AND LAUNDRY  
brief description

Mechanical: NEW FURNACE + DUCTWORK 9-H.A. ROOM  
brief description

Sign:                      Dimensions                      Sign Area                     

Additional Information: REMODEL 2ND FLOOR ADD LANDING TO BOT OF 2ND FL STAIR + ADD WOOD DECK TO REAR RELOCATE DOORS ON 2ND FLOOR + REMOVE CLOSET WALL

Date                      Applicant Signature                      owner-agent



CITY OF NAPOLEON  
 BUILDING INSPECTION DEPARTMENT  
 APPLICATION FOR BUILDING PERMIT  
 (Please print or type)

The undersigned hereby makes application for construction, installation, or alteration work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 226 1/2 E Clinton Cost of project \$5000.00  
 Owner's Name JAMES TORRES Address 910 Hobson  
 Contractor SELF Telephone No. 592-6731  
 Address 910 Hobson St

Lot Information: (Not required for siding job)  
 Lot No. 126 Subdivision STAFFORD 2ND  
 Zoning District \_\_\_\_\_ Lot Size \_\_\_\_\_ ft. X \_\_\_\_\_ ft. Area \_\_\_\_\_ sq. ft.  
 Setbacks: Front \_\_\_\_\_ Right Side \_\_\_\_\_ Left Side \_\_\_\_\_ Rear \_\_\_\_\_

Work Information:  
 Residential X Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 New Construction \_\_\_\_\_ Addition \_\_\_\_\_ Remodel X  
 Accessory Building \_\_\_\_\_ Siding \_\_\_\_\_

Brief Description of Work: Remodel Inside, Deck, Add Front entry way, new doors + 3 new windows  
 (Specific Type)

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ No. of Stories \_\_\_\_\_  
 Area: 1st Floor 1200 sq. ft. Basement 1000 sq. ft.  
 2nd Floor 1200 sq. ft. Accessory Bldg. \_\_\_\_\_ sq. ft.  
 3rd Floor \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.

Additional Information: \_\_\_\_\_

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 8-24-87 Applicant's Signature Jerry Torres

PERMIT NO. \_\_\_\_\_ PERMIT FEE \$ \_\_\_\_\_





CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR ELECTRICAL PERMIT  
(Please print or type)

The undersigned hereby makes application for installation or replacement of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Codes.

Owner's Name JAMES TONJES Address 910 Hobson

Electrical Contractor Self Telephone No. 592-6731

Address 910 Hobson

General Contractor \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

Location of Project 226 1/2 Hobson Cost of Project \$ 1000.00

Work Information:

Residential 2 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

No. Units

New \_\_\_\_\_ Service Change \_\_\_\_\_ Rewiring X Additional Wiring \_\_\_\_\_

Brief Description of Work: Rewire Entire Apartment

Size of proposed service entrance \_\_\_\_\_ Number of new circuits 6-ESTIM

Type of proposed service entrance \_\_\_\_\_ Underground \_\_\_\_\_ Overhead X

Require Temporary Electric \_\_\_\_\_ (Yes or No)

Total Floor Area - Commercial and Industrial only \_\_\_\_\_ sq. ft.

Additional Information: \_\_\_\_\_

PERMIT NO. \_\_\_\_\_  
PERMIT FEE \$ \_\_\_\_\_

\*Ground fault circuit interrupter protection is required on all 120-volt single phase, 15 and 20 amp. Circuits which are part of a temporary electric service; and also on bathroom, outdoor, and garage receptacles in all dwelling units. Art. 210-8 N.E.C.

Application for permit shall be accompanied by two complete sets of plans including: Electrical layout and riser diagram. (For commercial and industrial work only).

ate 8-24-87

Applicant's Signature James Tonjes



CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR PLUMBING PERMIT  
(Please print or type)

The undersigned hereby makes application for the installation or replacement of plumbing work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Codes. (1, 2 and 3 family dwelling units only).

Owner's Name JAMES TANJES Address 910 Hobson  
Plumbing Contractor Elling Plumbing + Heating Telephone No. \_\_\_\_\_  
Address St. Rt 108  
General Contractor JAMES TANJES Telephone No. 592-6731  
Address 910 Hobson  
Location of Project 226 1/2 E. Clinton Cost of Project \$ 3000.00

Work Information:

No. of dwelling units 2 New \_\_\_\_\_ Replacement X Addition \_\_\_\_\_

Brief description of work: All new Plumbing, new stool, shower  
Bathroom Sink, new Kitchen Sink

Is water tap required \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_

Is sewer tap required \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_

Type of Water Distribution pipe P.V.C.

Type of Drainage, Waste and Vent Pipe P.V.C.

Size of main building drain \_\_\_\_\_ Size of main vent pipe 4"

Water closets	<u>—</u>	Bathtubs	<u>1</u>	Shower	<u>1</u>
	No.		No.		No.
	Trap Size		Trap Size		Trap Size

Lavatories	<u>1</u>	Kitchen Sink	<u>1</u>	Disposal	<u>—</u>
	No.		No.		No.
	Trap Size		Trap Size		Trap Size

Dishwasher	<u>—</u>	Clothes Washer	<u>1</u>	Other	<u>—</u>
	No.		No.		No.
	Trap Size		Trap Size		Trap Size

All installations are subject to plumbing tests and/or inspections.

Date 2-24-87 Applicant's Signature Jerry [Signature]

PERMIT NO. \_\_\_\_\_  
PERMIT FEE \$ \_\_\_\_\_





CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR HEATING PERMIT  
(PLEASE PRINT OR TYPE)

The undersigned hereby makes application for the installation, replacement or alteration of a heating system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Mechanical Code for 1, 2 and 3 Family Buildings.

Owner's Name JAMES TANJES Address 910 HOBSON

Contractor's Name ELLING PLUMBING HEATING Address ST. CL. 102 Tel. \_\_\_\_\_

BUILDING INFORMATION:

Single Family \_\_\_\_\_ Double Family  Multiple \_\_\_\_\_ New Construction \_\_\_\_\_

Addition \_\_\_\_\_ Remodel  Replacement \_\_\_\_\_ No. of Stories 2

DESCRIPTION OF WORK

Heating System - Warm Air  Hot Water \_\_\_\_\_ Steam \_\_\_\_\_ Electric \_\_\_\_\_

Unit Heaters \_\_\_\_\_ Unit Gas Heaters \_\_\_\_\_ Other \_\_\_\_\_

Type - Gravity \_\_\_\_\_ Forced  Radiant \_\_\_\_\_

No. of Thermostatical Heating Zone \_\_\_\_\_

Hot Water - One Pipe \_\_\_\_\_ Two Pipe \_\_\_\_\_ Series Loop \_\_\_\_\_

Electric Heat - No. of Circuits \_\_\_\_\_ Other \_\_\_\_\_

Total Heat Loss of Area to be Heated \_\_\_\_\_ Btu.

Rated Capacity of Furnace/Boiler \_\_\_\_\_ Btu.

(EXISTING)  
No. of Furnaces 1 No. of Hot Air Runs 9

No. of Hot Water Radiators \_\_\_\_\_ Type of Fuel NATURAL GAS

Heating Units Located: Crawl Space \_\_\_\_\_ Floor Level  Suspended \_\_\_\_\_

Roof or Exposed to Outside Air \_\_\_\_\_ Attic \_\_\_\_\_ Other \_\_\_\_\_

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: \_\_\_\_\_

DATE 2-24-67 APPLICANT'S SIGNATURE Jerry Jones

OWNER-CONTRACTOR-AGENT



SHELBY ST.

69.3'

156.9

112.1

181.5

LOT # 126  
STAFFORDS 2N 400

15.4

50.5

11.3'

ADDITION

22'

22.1

18.2

E CLINTON

69.3'

181'

4.2 ROD x 11 ROD





Proposed Addition

3'-0"  
New Door

New Door

1st  
Floor

New Window

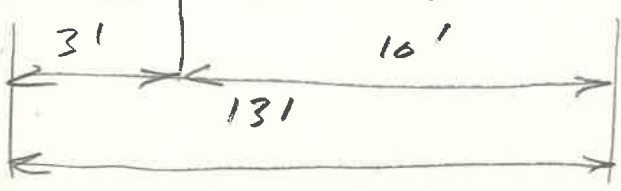
New Door

Stairway

Proposed  
8' x 10'  
Deck

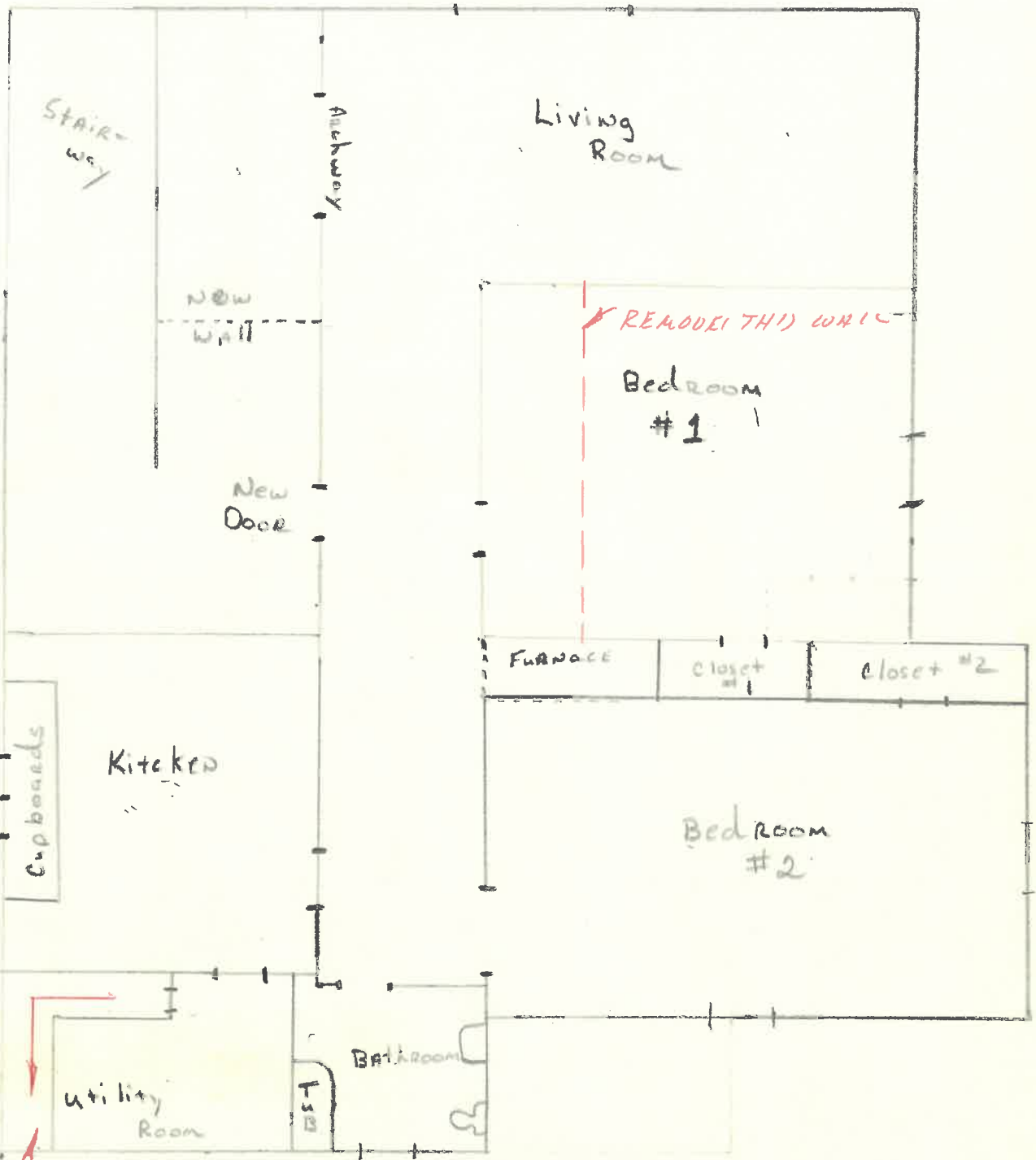
8'-0"  
OVERHEAD ELECTRICAL ENTRANCE

N





New Window



Stairway

Hallway

Living Room

NEW WALL

REMODEL THE WALL

Bedroom #1

New Door

FURNACE

closet #1

closet #2

New Window

Cupboards

Kitchen

Bedroom #2

Utility Room

Bathroom

T.B.

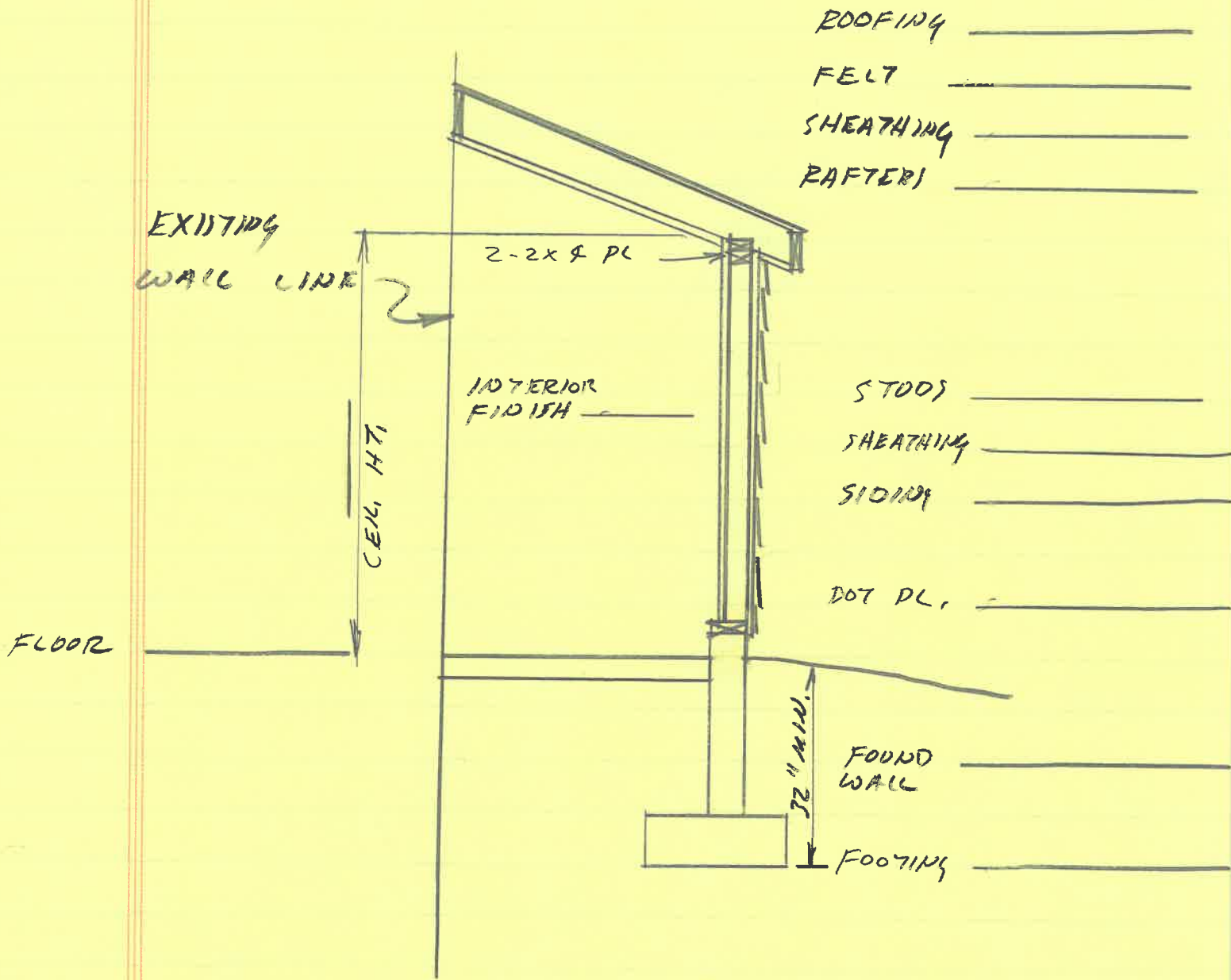
NEW WINDOW

STAIR

N







WALL SECTION

226 1/2 E. CLINTON

