

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 01489 Issued 11-23-87
date

Job Location 529 W. Clinton
address

Lot 5 Sheffield's Subdiv. O.L. #1
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Bob Miller
name tel.

Address 529 W. Clinton

Agent County Line Carpenter
builder-eng.-etc. tel.

Address Rt. #3 - Defiance, Ohio

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 3,000.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	18.00	24.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			24.00
LESS MIN. FEES PAID _____			
<small>date</small>			
BALANCE DUE.....			

ZONING INFORMATION N.A.

district	lot dimensions	area	front yd	side yds	rear yd
<u>B</u>					
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION: N.A.

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

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

Electrical: N.A.
brief description

Plumbing: N.A.
brief description

Mechanical: N.A.
brief description

Sign: NA. Dimensions _____ Sign Area _____
type

Additional Information: Vinyl siding.

PAID

Date 11-23-87 Applicant Signature Kenneth Z Drewes **NOV 23 1987**
owner-agent

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				
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.					INSPECTIONS, CORRECTIONS, ETC.						
	PARTIALLY COMPLETED				2/4	FK						
	95% COMPLETE				5/24	FK						

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01489 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. Issued date
 Job Location 529 W. CLINTON address
 Lot 5 SHEFFIELDS SDB DIV. OL. #1 sub-div or legal discript
 Issued By 54 building official
 Owner ROB MILLER name tel.
 Address 529 W. CLINTON
 Agent COUNTY LINE CARPENTER builder-eng.-etc. tel.
 Address R#3 DEFIANCE, OHIO
 Description of Use RESIDENCE
 Residential 1 no. dwelling units
 Commercial Industrial
 New Add'n. Alter Remodel X
 Mixed Occupancy
 Change of Occupancy
 Estimated Cost \$ 3000.00

FEES	BASE	PLUS	TOTAL
BUILDING	6.00	18.00	24.00
ELECTRICAL			
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. <u> </u> hrs		
	Elect. <u> </u> hrs		
TOTAL FEES.....			24.00
LESS MIN. FEES PAID <u> </u> date			
BALANCE DUE.....			

ZONING INFORMATION N.A.

district	lot dimensions	area	front yd	side yds	rear yd
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WORK INFORMATION: N.A.

Size: Length Width Stories Ground Floor Area
 Height Building Volume (for demo. permit) cu. ft.
 Electrical: N.A. brief description
 Plumbing: N.A. brief description
 Mechanical: N.A. brief description
 Sign: N.A. Dimensions Sign Area
 type

Additional Information: VINYL SIDING

PAID

NOV 23 1987

Date Applicant Signature owner-agent

CITY OF NAPOLEON

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 529 W-Clinton Cost of project 3000.⁰⁰
Owner's Name BOB MILLER Address _____
Contractor COUNTY LINE CARPENTER Telephone No. 267-3484
Address R#3 DESIANCE, OHIO

Lot Information: (Not required for siding job)

Lot No. _____ Subdivision _____
Zoning District _____ Lot Size _____ ft. X _____ ft. Area _____ sq. ft.
Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential Commercial _____ Industrial _____
New Construction _____ Addition _____ Remodel _____
Accessory Building _____ Siding 1/4 NIP
(Specific Type)

Brief Description of Work:-----

Size: Length _____ Width _____ No. of Stories _____
Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.
2nd Floor _____ 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 11-27-87 Applicant's Signature Kenneth F. Drewes

PERMIT NO. _____
PERMIT FEE \$ _____

