

# PERMIT

## CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 02249 Issued 4-15-91  
date

Job Location 637 West Clinton, Napoleon  
address

Lot 36 Sheffields Second  
sub-div or legal discript

Issued By Brent N. Damman  
building official

Owner Jeff Rahmel 599-8197  
name tel.

Address 637 West Clinton, Napoleon

Agent Self  
builder-eng.-etc. tel.

Address \_\_\_\_\_

Description of Use Residential

Residential 1  
no. dwelling units

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

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

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

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

Estimated Cost \$ 200.00

| FEES  | BASE              | PLUS | TOTAL   |
|---|-------------------|------|---------|
| <input type="checkbox"/> BUILDING                         |                   |      |         |
| <input checked="" type="checkbox"/> ELECTRICAL            | 15.00             |      | 15.00   |
| <input type="checkbox"/> PLUMBING                         |                   |      |         |
| <input type="checkbox"/> MECHANICAL                       |                   |      |         |
| <input type="checkbox"/> DEMOLITION                       |                   |      |         |
| <input type="checkbox"/> ZONING                           |                   |      |         |
| <input type="checkbox"/> SIGN                             |                   |      |         |
| <input type="checkbox"/> WATER TAP                        |                   |      |         |
| SEW. INSP.  |                   |      |         |
| SEWER TAP   |                   |      |         |
| TEMP. WATER   |                   |      |         |
| TEMP. ELECT.  |                   |      |         |
| ADDITIONAL PLAN REVIEW                                    | Struct. _____ hrs |      |         |
|   | Elect. _____ hrs  |      |         |
| TOTAL FEES.....   |                   |      | \$15.00 |
| LESS MIN. FEES PAID <u>4-15-91</u><br><small>date</small> |                   |      | 15.00   |
| BALANCE DUE.....  |                   |      | \$ 0.00 |

### ZONING INFORMATION

| district | lot dimensions | area          | front yd  | side yds                 | rear yd   |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| B        | 66 x 165       | 10890         | 25'       | 5'                       | 15'       |
| max hgt  | no pkg spaces  | no ldg spaces | max cover | petition or appeal req'd | date appr |
| 35'      | 2 per          |               | 45%       |                          |           |

### WORK INFORMATION:

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

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

Electrical: Service Change  
brief description

Plumbing: \_\_\_\_\_  
brief description

Mechanical: \_\_\_\_\_  
brief description

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

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

Date 4-17-91 Applicant Signature Jeff Rahmel by BND  
owner-agent



APPLICATION  
for  
RESIDENTIAL BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS and DEMOLITION PERMIT  
from the

CITY OF NAPOLEON - BUILDING DEPARTMENT

Entry No. \_\_\_\_\_ 255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 419-592-4010

Permit No. 02249 Issued 4-15-91

| Chk. Permits Reg.                              | Base         | Fees Plus | Total        |
|--|--------------|-----------|--------------|
| Building                                       | _____        | _____     | _____        |
| <input checked="" type="checkbox"/> Electrical | <u>15.00</u> | _____     | <u>15.00</u> |
| Plumbing                                       | _____        | _____     | _____        |
| Mechanical                                     | _____        | _____     | _____        |
| Demolition                                     | _____        | _____     | _____        |
| Zoning   | _____        | _____     | _____        |
| Sign   | _____        | _____     | _____        |
| Water tap                                      | _____        | _____     | _____        |
| Sewer Tap                                      | _____        | _____     | _____        |
| Temp. Water                                    | _____        | _____     | _____        |
| Temp. Elec.                                    | _____        | _____     | _____        |
| Additional struc. plan review                  | _____ hrs    | _____     | _____        |
| Elect.   | _____ hrs    | _____     | _____        |
| Total Fees.....                                | _____        | _____     | <u>15.00</u> |
| Less Min. Fees Pd.                             | _____ date   | _____     | _____        |
| Balance Due.....                               | _____        | _____     | _____        |

Job Location 637 WEST CLINTON NAPOLEON

Lot 36 Sheffields 2nd  
sub-div. or legal disc.

Issued By BND  
building official

Owner JEFF RAYMEL Pn 5998197

Address 637 W. CLINTON NAPOLEON

Agent Self Pn \_\_\_\_\_

Address \_\_\_\_\_

Description of Use Residential

Residential

Residential \_\_\_\_\_ no. dwelling units \_\_\_\_\_  
Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

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

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

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

Estimated Cost \$ 200.00

-ZONING INFORMATION

| district  | lot dimensions  | area          | front yd   | side yds.                 | rear yd   |
|-----------|-----------------|---------------|------------|---------------------------|-----------|
| <u>B</u>  | <u>60 x 165</u> | <u>10890</u>  | <u>25</u>  | <u>5</u>                  | <u>15</u> |
| max hgt,  | no pkg spaces   | no ldg spaces | max cover  | petition or appeal req'd. | date appr |
| <u>35</u> | <u>2 per</u>    |               | <u>15%</u> |                           |           |

WORK INFORMATION:

BUILDING: Garage Fl. Area \_\_\_\_\_ Basement Fl. Area \_\_\_\_\_ Second Floor Area \_\_\_\_\_  
Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_  
Height \_\_\_\_\_ Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Description of Work: \_\_\_\_\_

**PAID**

**APR 15 1991**

**CITY OF NAPOLEON**

Continue on Back Side for Electrical, Plumbing and Mechanical and other Information;





**ELECTRICAL:** Electrical Contractor Self Pn. \_\_\_\_\_  
 Address \_\_\_\_\_ Estimated Cost 210  
 Type of work: New \_\_\_\_\_ Service change  Rewiring  Additional Wiring \_\_\_\_\_ Temp. Elec. Req. \_\_\_\_\_  
 Size of service \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_ No. of new circuits \_\_\_\_\_  
 Description of work: Service Change

**PLUMBING:** Plumbing Contractor \_\_\_\_\_ Pn. \_\_\_\_\_  
 Address \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_  
 Water Tap Req. \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_ type  
                   yes    no  
 San. Sewer Tap Req. \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_ type  
                   yes    no  
 St. Sewer Tap Req. \_\_\_\_\_ 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 \_\_\_\_\_ No. \_\_\_\_\_  
 Description of Work: \_\_\_\_\_

**MECHANICAL:** Mechanical Contractor \_\_\_\_\_ Pn. \_\_\_\_\_  
 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 \_\_\_\_\_  
 No. 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 \_\_\_\_\_ Other \_\_\_\_\_  
 Description of Work \_\_\_\_\_

**DRAWINGS REQUIRED:** All Applications must be Accompanied by Two Complete sets of Drawings Including SITE PLAN, FOUNDATION PLAN, FLOOR PLANS, STRUCTURAL FRAMING PLANS, EXTERIOR ELEVATIONS, SECTIONS and DETAILS, STAIR DETAILS, ELECTRICAL LAYOUT, PLUMBING ISOMETRIC, HEATING LAYOUT ETC. All plans shall be DRAWN TO SCALE. Show all existing structures on the site plan 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.D. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Dept. Rules and Regulations, Standard Specifications and other Pertinent Sections of the Napoleon Code of Ordinances.

Date 4-14-91 Signature of Applicant [Signature]  
 Application not valid without signature

