### CITY OF NAPOLEON - BUILDING DEPARTMENT

| Permit No.    | 01787 Iss  | ued 7-12-89<br>date  | XE   | FEES        | BASE               | PLUS   | TOTA          |
|---------------|--|--|--|-------------|--------------------|--|---------------|
|               | on_ 650 W. Clin  | ton Street   | ÞBUIL  | DING        | 9.00               |  | 9.00          |
| N.W.          | $\frac{1/4}{1/4}$ Sec. 14 sub-div  | address<br>Nap. Twp.   | _ DELEC  | CTRICAL     |                    |  |               |
|               | Eldon Hubbr  | or legal discript  | - APLUN  | MBING       |                    |  |               |
| OwnerD        | building official<br>ouglas Haase  | 599-816  | TMEC   | HANICAL     | Springs            |  |               |
|               | name<br>50 W. Clinton  | tel.   | _ 0  | OLITION     |                    |  |               |
|               | SELF   |  | -<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>-<br>- |             |                    |  |               |
| bı            | uilder-engetc.<br>Same as abov   | tel.   | - ↓SIGN  |             | The state of       |  | umnymed       |
| Address       |  |  | - Lwati  | ER TAP      | 1200               |  |               |
| Description   | of Use Residence   |  | - T <sub>SEW.</sub>                            | INSP.       | main               |  | - 2000        |
|               | (alemin's)   |  |  | ER TAP      | INUO I             |  | LACT PAIL     |
| Residential_  | no. dwelling units   | neth.  |  | P. WATER    | Footbline F        |  |               |
| Commercial    | ACTUAL DESIGNATION OF THE PERSON OF THE PERS | ial  | RI   | P. ELECT.   | Predocts V         |  |               |
| New           | Add'nAlter   | RemodelX   | Tinge, co                                      | DITIONAL    | Struct.            | hrs  | 2 margae      |
| Mixed Occup   | pancy  | a) todirect  | THE CO   | PLAN        | Haudil             |  | Palliment     |
| Change of O   | occupancy  | ned ingr   | BW. D  | REVIEW      | Elect              | hrs  | TOUR MENTS    |
| Estimated C   | ost \$ 250.00  |  |  | OTAL FEES   | S                  |  | Statements.   |
|               | FINAL  | IAINH Y  | L  | ESS MIN. F  | EES PAID           | fate   | Hotimoti      |
|               | ZONING INFORMAT  | TION N/A   | B  | ALANCE DI   | UE                 |  | 9.00          |
| district<br>B | lot dimensions   | area O   | fro fro  | ont yd      | side               | yds  | rear yd       |
| max hgt       | no pkg spaces  | no Idg spaces  | max cover                                      | petitic     | on or appeal req'd |  | date appr     |
|               |  | distribution of the state of th | to C   |             |                    |  | il colungs is |
| WORK INFO     | RMATION: N.A.  |  |  |             |                    |  |               |
| Size: Length  | Width  |  | tories   | Gro         | ound Floor Are     |  | i Gourantian  |
| Height.       |  | ling Volume (for d   |  |             | und Ploor Are      | a  | 107-112       |
| Electrical:   | PINAL APPRO  | ing volume (for d  | emo. permit)                                   |             | 10019              |  | cu. ft.       |
|               | to etc. drugs  | brief description  | n  |             | Figst Person       |  |               |
| Plumbing:     | Manual Indian Arton  | brief description  | 0083   | THE RESERVE | System Co.         |  | ROW WAR       |
| Mechanical:   | TOTAL COMMEDITION  | brief description  | 1 .072   | ECTIONS. E  | IRROD PADI         | DRASHI   |               |
| Sign:type     | Dimens   |  |  | * (         | Sign Area          | e P./  | NID-          |
| dditional Inf | ormation: Repla  | ce Spouting  |  |             |                    | 1111   | 1 1 1000      |
|               |  |  |  |             |                    | JUL  | 1 1369        |
|               |  |  |  | 0.40        |                    | All the same of th |               |
| ate July      | 11,1989 Applic   | ant Signature 4  | Douglas (                                      | 3 Has       | wner-agent         | CITY OF N  | APOLEON       |

**Gold-County Auditor** 

## INSPECTION RECORD

|            | UNDERGROUND                  |                           |     |                                  | ROUGH-IN FINAL |     |  |              |     |                                       |      | _      |
|------------|------------------------------|---------------------------|-----|----------------------------------|----------------|-----|--|--------------|-----|---------------------------------------|------|--------|
|            | Туре                         | Date                      | Ву  | Туре                             | Date           | Ву  | Туре   | Date         | Ву  | у СТуре                               | Date | Ву     |
| PLUMBING   | Building<br>Drains           |                           |     | Drainage, Waste<br>& Vent Piping | 1              | HIE | Indirect<br>Waste  |              |     | Drainage, Waste<br>& Vent Piping      |      |        |
|            | Water<br>Piping              |                           |     | - 1                              |                | L   |  |              |     | Backflow<br>Prevention                |      |        |
|            | Building<br>Sewer            |                           |     | Water<br>Piping                  |                |     | Condensate<br>Lines  |              |     | Water<br>Heater                       |      |        |
|            | Sewer                        |                           |     |                                  |                |     |  |              |     | FINAL<br>APPROVAL                     |      |        |
|            | Connection                   |                           |     | MINISTRAL BUILDING               |                |     | A THE RESIDENCE OF THE PARTY OF | and the same | -   |                                       | M    | CENTER |
|            | Refrigerant<br>Piping        |                           |     | Refrigerant<br>Piping            |                |     | Chimney(s)   |              |     | Grease Exhaust<br>System<br>Air Cond. |      |        |
| X          |                              |                           |     | Duct<br>Furnace(s)               |                |     | Fire<br>Dampers  |              |     | Unit(s)                               |      |        |
| MECHANICAL | Ducts/<br>Plenums            |                           |     | Ducts/<br>Plenums                |                | 1   | ☐ Radiant Htr(s)☐ Unit Htr(s)  |              |     | Refrigeration<br>Equipment            |      |        |
|            | Tionamo                      |                           |     | Duct<br>Insulation               |                |     | Pool<br>Heater   |              |     | Furnace(s)                            |      |        |
|            |                              |                           |     | Combustion<br>Products Vents     |                |     | Ventilation  ☐ Supply ☐ Exhst.   |              |     | FINAL<br>APPROVAL                     | -    |        |
| ELECTRICAL | Conduits &                   |                           |     | Conduits/<br>Cable               |                |     | ☐ Range<br>☐ Dryer   |              | Τ   | Temp Service<br>Temp Lighting         |      |        |
|            | or Cable Grounding &         |                           | -   | Rough<br>Wiring                  |                |     | ☐ Generator(s) ☐ Motors  |              |     | Fixtures<br>Lampholders               |      |        |
|            | or Bonding<br>Floor Ducts    |                           |     | Service Panel<br>Switchboard     |                |     | □ Water Htr<br>□ Welder  |              |     | Signs                                 |      |        |
|            | Raceways<br>Service          |                           | 1   | Busways<br>Ducts                 |                |     | ☐ Heaters<br>☐ Heat Cable  |              |     | Electric Mtr.<br>Clearance            |      |        |
|            | Conduit Temporary Power Pole |                           | -   | Subpanels                        |                |     | □ Duct Htr(s) □ Furnace(s)   |              |     | FINAL<br>APPROVAL                     |      |        |
|            | Location, Set-               |                           |     | Exterior Wall<br>Construction    |                |     | Roof Covering<br>Roof Drainage   |              |     | Smoke<br>Detector                     |      |        |
|            | backs, Esmt(s) Excavation    |                           |     | Construction                     |                |     | Exterior<br>Lath   |              |     | Demolition<br>(sewer cap)             |      |        |
|            | Footings &                   |                           | +   |                                  |                |     | ☐ Interior Lath<br>☐ Wallboard   |              |     |                                       |      |        |
| DNI        | Reinforcing<br>Floor         |                           |     | Interior Wall<br>Construction    |                |     | Fire<br>Wall(s)  |              |     | Building or<br>Structure              |      |        |
| BUILDING   | Slab<br>Foundation<br>Walls  |                           |     | Columns &<br>Supports            |                |     | Fireplace<br>Chimney   |              |     |                                       |      |        |
| 18         | Sub-soil<br>Drain            |                           |     | Crawl Space                      |                |     | Attic  D Vent D Access   | 511          |     |                                       |      |        |
|            | Piles                        |                           |     | Floor<br>System(s)               |                |     |  |              |     | FINAL APPROVAL<br>BLDG. DEPT.         | 11/2 | 15     |
|            |                              |                           |     | Roof<br>System                   |                |     | Special Insp<br>Reports Rec'd  |              |     | Certificate of<br>Occupancy Issued    |      |        |
|            |                              | INSPECTIONS, CORRECTIONS, |     |                                  | ONS, E         | TC. | INSF   | ECTI         | ONS | , CORRECTIONS,                        | ETC. |        |
| ADDITIONAL | QIA!                         | 9                         | 112 |                                  |                |     |  |              |     |                                       |      |        |
|            | 111989                       |                           |     |                                  |                |     |  |              |     |                                       | -    |        |
| TIC        | -                            |                           | r>  |                                  |                |     |  |              |     |                                       |      |        |
| ADI        | CITOTAN                      | OYU                       | J   |                                  |                |     | or - c   |              |     |                                       |      |        |
|            |                              |                           |     |                                  | -              | 4   |  |              | -   |                                       | +    | +      |

#### **APPLICATION**

for

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

CITY OF NAPOLEON - BUILDING DEPARTMENT
255 West Riverview Ave. Napoleon. Ohio 43545 Pm. 419-592-4010

| Entry No.            | 255 (                             | lest Riverview Ave. Napo   | leon, Ohio 435 | 45 Pn. 419-592-40 | 010                                   |                     |          |
|----------------------|-----------------------------------|--|----------------|-------------------|---------------------------------------|---------------------|----------|
| Permit No. 017       | 87 Issued 7- 1:                   | 2-89   | ********       | Ck.Peraits Reg.   | Base                                  | <u>Fees</u><br>Plus | Total    |
| Job Location 6       | 50 W-Cliston 5                    | 7  |                | X Building        | 9,0€                                  | 100                 | 900      |
|                      | EC. 14 N. sub-div. or legal disc. |  |                | Electrical _      | ~~~                                   |                     |          |
| Issued By            | muilding official                 | P.a.   | 2 01//         | Plumbing _        | -4                                    |                     |          |
| Owner Dougla         | ouilding official S. Hagse        | Pn 57  | 1-8164         | Mechanical _      |                                       |                     |          |
| Address 650 C        | W- Clinton St-                    |  | ******         | Demolition _      |                                       |                     |          |
| Agent <u>Doug</u>    | las Haasa                         | Pn <i>50</i>   |                | Zoning            |                                       |                     |          |
|                      | £                                 |  |                | Sign              |                                       |                     |          |
| Description of Use   | - 12 W Sport frag                 | RESIDENCE  |                | Water tap         |                                       |                     |          |
|                      |                                   | 77 th (b) 40 th ab an ab are an 20 th (b) 45 th ab ab ab (b) are ab an 30 th |                | Sewer Tap         |                                       |                     |          |
| Residential          | . dwelling units                  |  |                | Temp. Water       |                                       |                     |          |
| Commercial           | Indu                              | strial   |                | Temp. Elec.       |                                       |                     |          |
| NewAd                | id'nAlter_                        | Remodel  |                | Additional        |                                       |                     |          |
| Mixed Occupancy      | *************                     |  |                | bīsu              |                                       | hrs_                |          |
| Change of Occupancy  |                                   |  |                | Total Fees        |                                       |                     |          |
| Estimated Cost \$    | 250.00                            | *************************  | ********       | Less Min. Fee:    | s Pd.                                 |                     |          |
| -ZONING INFORMATION  | NA                                |  |                | Balance Due       | da                                    | te 9                | 00       |
| district             | lot dimensions                    |  | fron           | nt yd             | side yds.                             | ******              | rear vd  |
| max hgt              | no pkg spaces                     | no Idg spaces  |                | petition or       | appeal req'd                          | . d                 | ate appr |
| WORK INFORMATION:    |                                   |  |                |                   | · · · · · · · · · · · · · · · · · · · |                     |          |
| BUILDING:            | Garage Fl. Area                   | Basement   | Fl. Area       | Se                | cond Floor Ar                         | <b>'</b> 23         |          |
| Size: Length         | Width                             | StoriesGro   | und Floor Area | 7000000000000000  |                                       |                     |          |
| Hei ght              | Building                          | Volume (for demo, permi  | t)             |                   |                                       |                     | **       |
| Description of Work: | Replace spo                       | uting  | 4 5 d m +      |                   |                                       |                     |          |
|                      | *                                 | **********************   |                |                   | PA                                    | l D                 |          |
|                      |                                   |  |                |                   | 43 44                                 |                     |          |

JUL 1 1 1989

CITY OF NAPOLEON

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

| ELECTRICAL: Electrical Contractor  |   |  |
|--|---|--|
| Address  | Estimated Cost \$   |  |
| Type of work: New Service change Rewiring Additional Wiring _  | Temp. Ele   |  |
| Size of service Underground Overhead   | No. of new circuits   | yes no                                     |
| Description of work:   | ~~~***********************************                              |  |
| PLUMBING: Plumbing Contractor  | Pn  | - wyke                                     |
| Address  | Estimated Cost \$   |  |
| Water Tap Req. SizeType of Pipe  | Water Dist. Pipe  | type                                       |
| 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                                  |
| Main Building Drain Size Main Vent Pipe Size   | List Number of F  | yes no<br><u>Plumbing Fixtures Belo</u>    |
| Water Closets Bathtubs Showers Lavatories Kitchen Sinks  | Disposal Dishwasher   | Clothes Washer                             |
| Floor Drains Other Fixtures: Type  | •••••••   | No.  |
| Description of Work:   |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,    |
| •  |   |  |
| NECHANICAL: Mechanical Contractor  |   |  |
| Address  | Estimated Cost  |  |
| Heating System: Forced Air Bravity Hot Water Steam   | Unit Heaters Radiant  | Baseboard                                  |
| Type of Fuel: Electric Natural Sas Propane Mood Coal Sola  | ar Geothermal Other   |  |
| No. of Heat.Zones Hot Water: (One Pipe Two Pipe Series Loop) El  | lectric Heat:(No of Circuits  | ) No. of Furnaces                          |
| No. of Hot Air Runs No. of Hot Water Radiators Total Heat Loss   |   |  |
| Location of Heating Units: Crawl Space Floor Level Attic Suspended R   | Roof Outside Other  |  |
| Description of Work  |   | ****                                       |
| DRAWINGS REQUIRED: All Applications must be Accompanied by Two Complete sets of FLOOR PLANS, STRUCTURAL FRAMING PLANS, EXTERIOR ELEVATIONS, SECTIONS and DETAILS HEATING LAYOUT ETC. All plans shall be <u>DRAWN TO SCALE</u> . Show all existing structurace Locations.       | 6, STAIR DETAILS, ELECTRICAL LAYOU                                  | IT, PLUMBING ISOMETRIC                     |
| READ AND SIGN BELOW; The undersigned hereby makes application for a permit for a work in strict accordance with all applicable provisions of the current edition and Zoning Codes, the Napoleon Engineering Dept. Rules and Regulations, Standard Napoleon Code of Ordinances. | of the C.A.B.O. Building Code, the Specifications and other Pertine | e Napoleon Building<br>ont Sections of the |
| Date July 11, 1989 Signature of Applicant Tough  | 46 Hasse Application not valid without sign                         | ature                                      |

THE THE PARTY OF THE