

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 02121 Issued 10-09-90
date

Job Location 653 West Clinton
address

Lot 34 Sheffields 3rd.
sub-div or legal discript

Issued By Brent N. Damman
building official

Owner David Flory 599-8251
name tel.

Address 653 West Clinton

Agent Bob's Electrical & Plbg.
builder-eng.-etc. tel.

Address 304 Railway, Holgate, Ohio

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 2150.00

ZONING INFORMATION

| | | | | | |
|-----------------------|-----------------------------------|---------------------|-------------------------|--------------------------|----------------------|
| district B | lot dimensions 60 x 165 | area 9900 | front yd 25 | side yds 5 | rear yd 15 |
| max hgt 35' | no pkg spaces 2 per | no ldg spaces | max cover 45% | petition or appeal req'd | date appr |

WORK INFORMATION:

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

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

Electrical: _____
brief description

Plumbing: Add full bath.
brief description

Mechanical: Two (2) supply runs to new addition.
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: Second floor full bath.

Date 10/9/90 Applicant Signature Robert A Westrich
owner-agent

PAID
 OCT 09 1990

CITY OF NAPOLEON

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 | 10/25 | BD | Drainage, Waste & Vent Piping | | |
| | Water Piping | | | | | | | | | Backflow Prevention | | |
| | Building Sewer | | | Water Piping | 10/25 | BD | Condensate Lines | | | Water Heater | | |
| | | | | | | | | | | | | |
| | Sewer Connection | | | | | | | | | | FINAL APPROVAL | 11/3 |
| 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. | | | | | |
| | PAID | | | | | | | | | | | |
| | CITY OF KANSAS | | | | | | | | | | | |
| | KANSAS | | | | | | | | | | | |
| | KANSAS | | | | | | | | | | | |

ELECTRICAL: Electrical Contractor Wustwiller Electric Pn. 782-6762
Address 1822 Spruce St Defiance, Oh Estimated Cost \$ 1800.00
Type of work: New Service change Rewiring Additional Wiring Temp. Elec. Req. yes no
Size of service 200 Underground Overhead No. of new circuits 4
Description of work: Upgrade Service + add 4 Circuits
Socket Release # 0043-90

PLUMBING: Plumbing Contractor _____ Pn. _____
Address _____ Estimated Cost \$ _____
Water Tap Req. yes no Size _____ Type of Pipe _____ Water Dist. Pipe _____ type
San. Sewer Tap Req. yes no Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____ type
St. Sewer Tap Req. yes no 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.O. 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 10/24/90 Signature of Applicant John Wustwiller
Application not valid without signature

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W03J04M 30 Y TD

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 Pn. 419-592-4010

Entry No. _____

Permit No. 02121 Issued 10-9-10

Job Location 653 W. Clinton

Lot 34 Sheffields 3rd
sub-div. or legal disc.

Issued By Brent N. Damman
building official

Owner David Flory Pn 599-8251

Address 653 W Clinton

Agent Babs Electrical & Plbg Pn _____

Address 304 Railway Hobgate, Oh 43527

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 2150.00

-ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds. | rear yd |
|------------|-----------------|---------------|------------|---------------------------|-----------|
| <u>B</u> | <u>60 x 165</u> | <u>9900</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>45%</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: Second Floor Full Bath

| Ch. Permits Req. | Base | Fees Plus | Total |
|--------------------------|----------------|-------------|--------------|
| Building | _____ | _____ | _____ |
| Electrical | _____ | _____ | _____ |
| <u>X</u> Plumbing | <u>9.00</u> | <u>9.00</u> | <u>18.00</u> |
| <u>X</u> Mechanical | <u>5.00</u> | _____ | <u>5.00</u> |
| Demolition | _____ | _____ | _____ |
| Zoning | _____ | _____ | _____ |
| Sign | _____ | _____ | _____ |
| Water tap | _____ | _____ | _____ |
| Sewer Tap | _____ | _____ | _____ |
| Temp. Water | _____ | _____ | _____ |
| Temp. Elec. | _____ | _____ | _____ |
| Additional struc. review | _____ hrs | _____ hrs | _____ |
| Total Fees | _____ | _____ | <u>23.00</u> |
| Less Min. Fees Pd. | <u>10-9-90</u> | _____ | <u>23.00</u> |
| Balance Due | _____ | _____ | <u>0</u> |

PAID

OCT 09 1990

CITY OF NAPOLEON

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

ELECTRICAL: Electrical Contractor _____ Pn. _____

Address _____ Estimated Cost \$ _____

Type of work: New _____ Service change _____ Rewiring _____ Additional Wiring _____ Temp. Elec. Req. _____
yes no

Size of service _____ Underground _____ Overhead _____ No. of new circuits _____

Description of work: _____

PLUMBING: Plumbing Contractor _____ Pn. _____

Address _____ Estimated Cost \$ _____

Water Tap Req. _____ Size _____ Type of Pipe _____ Water Dist. Pipe _____
yes no type

San. Sewer Tap Req. _____ Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____
yes no type

St. Sewer Tap Req. _____ Size _____ Type of Pipe _____ Street to be Opened _____
yes no 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: *add ~~main~~ full Bath*

MECHANICAL: Mechanical Contractor _____ Pn. _____

Address _____ Estimated Cost *250.00*

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 *2* No. of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler *80,000*

Location of Heating Units: Crawl Space _____ Floor Level _____ Attic _____ Suspended _____ Roof _____ Outside _____ Other _____

Description of Work *2 Supply Runs To new Addition*

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.

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Date _____ Signature of Applicant _____ Application not valid without signature

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Dave + Brenda Flory
653 W Clinton
Napoleon OH

By Bergstedt Builders



