

PERMIT

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

2-56-73113

Permit No. 01678 Issued 12-19-88
date

Job Location 744 W. Clinton
address

Lot NW 1/4 Section 14 - Nap. Township
SE 1/4 sub-div or legal discript

Issued By Eldon Huber
building official

Owner Carl Flory
name tel.

Address 744 W. Clinton

Agent Weber Builders 274-5282
builder-eng.-etc. tel.

Address E-972 Co. Rd. 11

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 10,300.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	50.00	59.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input checked="" type="checkbox"/> DEMOLITION	10.00		10.00
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			69.00
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions		area	front yd	side yds	rear yd
B						
max hgt	no pkg spaces	no ldg spaces	max cover	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: N.A.
brief description

Plumbing: N.A.
brief description

Mechanical: N.A.
brief description

Sign: N.A. Dimensions _____ Sign Area _____
type

Additional Information: Remove existing asbestos siding and cover with vinyl siding and cellulose insultation. See attached addendum.

Date _____ Applicant Signature _____
owner-agent

PAID

DEC 19 1988

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			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 Lamp Holders		
	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			95% (CCW)		
	Piles		Floor System(s)						FINAL APPROVAL BLDG. DEPT.	1/5/74	
			Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.					INSPECTIONS, CORRECTIONS, ETC.					

880
 DEC 14 1973
 CITY OF WASHINGTON

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

01678

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date

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address

Lot SECTION 14 NAP TOWN
sub-div or legal descripr

Issued By F
building official

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name tel

Address 744 W. CLINTON

Agent WEBER BUILDERS 274-5232
builder-eng -etc tel

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no dwelling units

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Change of Occupancy _____

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Plumbing: N.A. brief description

Mechanical: N.A. brief description

Sign: N.A. type Dimensions _____ Sign Area _____

Additional Information: REMOVE EXISTING SIDING AND COVER WITH VINYL SIDING + CELLULOSE INSULATION. SEE ATTACHED ADDENDUM FOR

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 744 W. Clinton Cost of project \$10,300
 Owner's Name Carl Hart Address same
 Contractor WEBER Builders Telephone No. 974-5282
 Address E-972 Co. Rd. 11

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 vinyl
 (Specific Type)

Brief Description of Work: Blow cellulose in exterior walls and beside w/ vinyl

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 12/19/88 Applicant's Signature [Signature]

PERMIT NO. _____ PERMIT FEE \$ _____

Addendum No. 1 to
Demolition Permit No. 01678

This Permit is granted with the condition that any hazardous material including but not limited to toxic chemicals and asbestos which may be encountered by the contractor during the course of demolishing the building described on the above referenced permit must be removed and disposed of in a manner prescribed by the Ohio E.P.A., as described in Appendix C of the U.S.E.P.A. Nation Emission Standards For Hazardous Air Pollutants (N.E.S.H.A.P.S.) Asbestos Regulations (40 CFR61 subpart M) and the applicable O.S.H.A. Regulations.

Further that the removal of any such material be completed by a contractor who is licensed by the Ohio Department of Health in a manner prescribed by the Ohio E.P.A. which will contain any such materials encountered within the confines of the building being demolished until said material can be put into E.P.A. approved containers for transportation to a disposal site.

Disposal of said hazardous materials shall be at a site licensed by the Ohio E.P.A. to receive and store or dispose of the specific material in question.

Any such materials which are to be stored at an approved site shall be contained in a manner and in such containers as are approved by the Governing Regulatory Agency and the Ohio E.P.A.

Upon encountering such material the contractor must notify the owner of the property, the Ohio E.P.A. and the City of Napoleon Building Department and advise them of precisely which materials have been encountered, the procedure which will be used to dispose of the material, the contractor who will do the work and the disposal site.

Certificates of approval or copies of current licenses issued to the contractors and to disposal sites shall be submitted to the City of Napoleon Building Department for review.

The Contractor shall answer the following questions:

YES NO - A. An inspection of the building has revealed that hazardous materials are present.

YES NO-B. Laboratory testing of samples of suspect materials revealed that hazardous materials are present.

If the answer to question B. is Yes, describe the hazardous materials which were found to be present.

If the answer to question B is Yes, fill in the information listed below, for the licensed contractor who will remove the hazardous material, and submit a copy of the contractors license.

License No. _____

Expiration Date _____

Name of Company _____

Address _____

Phone No. _____

Owner or C.E.O. _____

If the answer to question B is yes, fill in the following information for the disposal site and submit a copy of the sites license.

License No. _____

Expiration Date _____

Name of Company _____

Address _____

Phone No. _____

Owner of C.E.O. _____

This addendum becomes part of the above referenced permit and modifies it only to the extent herein set forth.

Received and accepted by

12/19/88
Date

Fred W. DeLuca
Signature of applicant as a
condition of granting the
permit

