

CITY OF NAPOLEON  
255 W. Riverview  
NAPOLEON, OHIO 43545

message

reply

10  
THOMAS ASCHEMEIER  
785 CRIPPLE CREEK  
NAP. OHIO 43545

FOLD

subject WHILE MAKING FINAL  
INSPECTION AT THE ABOVE REF.

ADDRESS TODAY I NOTE THAT  
A WOOD DECK HAS BEEN CONSTRUCTED  
AT THE REAR OF THE HOUSE.  
SIDE THE DECK IS NOT SHOWN ON  
THE HOUSE DRAWINGS A SEPERATE

PERMIT WILL NEED TO BE OBTAINED IF YOU HAVE  
ANY QUESTIONS  
FOR IT, DRAWINGS REQ, INCLUDE YOU CAN CALL  
SITE PLAN, FLOOR PLAN + SECTION. MK @ 592-4010

date 8-28-87 signed ELOON HUBER

date \_\_\_\_\_ signed \_\_\_\_\_

SENDER: Mail white and pink copies with carbon intact.

RECEIVER: Reply, retain white copy, return pink copy.



**PERMIT**

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

Permit No. 01467 Issued 10-8-87 date  
 Job Location 785 Cripple Creek Ct. address  
 Lot 9 Cripple Creek Subdivision sub-div or legal discript  
 Issued By Eldon Huber building official  
 Owner Tom Aschemeier name 592-9255 tel.  
 Address 785 Cripple Creek Ct.  
 Agent Self builder-eng.-etc. tel.  
 Address \_\_\_\_\_  
 Description of Use Residence  
 Residential 1 no. dwelling units  
 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 New  Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 300.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00		6.00
<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. 1-copy	hrs .25	
	Elect.	hrs _____	
TOTAL FEES.....			6.25
LESS MIN. FEES PAID			_____ date _____
BALANCE DUE.....			_____

**ZONING INFORMATION**

district	lot dimensions	area	front yd	side yds	rear yd
A	90.12 X 131.99	11,895	30'	L-8' R-14.5'	46.12'
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
35'	2 - min.		35%	none	

**WORK INFORMATION:**

Size: Length 16' Width 12' Stories 1 Ground Floor Area 192 S.F.  
 Height 2' +/- 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: 16' x 12' wood deck.

**PAID**  
**JAN 13 1988**  
 CITY OF NAPOLEON

Date \_\_\_\_\_ Applicant Signature Letty Aschemeier owner-agent





# PERMIT

**CITY OF NAPOLEON - BUILDING DEPARTMENT**  
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 Agent Self builder-eng.-etc. tel.  
 Address \_\_\_\_\_  
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 Residential 1 no. dwelling units  
 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 New  Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 300.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00		6.00
<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. <u>1-copy</u> hrs <u>.25</u>		
	Elect. _____ hrs _____		
TOTAL FEES.....			6.25
LESS MIN. FEES PAID _____ date _____			
BALANCE DUE.....			

### ZONING INFORMATION

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 Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
 Additional Information: 16' x 12' wood deck.

**PAID**  
**JAN 13 1988**

Date \_\_\_\_\_ Applicant Signature [Signature] owner-agent

**CITY OF NAPOLEON**





**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**

01467 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No.                      Issued 10-7-87  
date  
 Job Location 785 CRIPPLE CREEK CT  
address  
 Lot 9 CRIPPLE CREEK SUB DIV.  
sub-div or legal discript  
 Issued By FK  
building official  
 Owner TOM ASCHEMEIER  
name tel.  
 Address 785 CRIPPLE CR. CT.  
 Agent SELF  
builder-eng.-etc. tel.  
 Address \_\_\_\_\_  
 Description of Use RESIDENCL  
 \_\_\_\_\_  
 Residential 1  
no dwelling units  
 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 New X Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 300.00

FEE	BASE	PLUS	TOTAL
BUILDING	6.00	1.00	6.00
ELECTRICAL			
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	1-COPY Struct. _____ hrs		1.25
	Elect. _____ hrs		
TOTAL FEES.....			6.25
LESS MIN. FEES PAID _____			
	<small>date</small>		
BALANCE DUE.....			

**ZONING INFORMATION**

district <u>A</u>	lot dimensions <u>90.12x 131.99</u>	area <u>11,895</u>	front yd <u>30'</u>	side yds <u>2-8' R-14.5'</u>	rear yd <u>46.12'</u>
max hgt <u>35'</u>	no pkg spaces <u>2-MIN</u>	no ldg spaces	max cover <u>35%</u>	petition or appeal req'd <u>NONE</u>	date appr

**WORK INFORMATION:**

Size: Length 16' Width 12' Stories 1 Ground Floor Area 192 S.F.  
 Height 2' ± Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

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 Plumbing: N.A. brief description  
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 Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
type

Additional Information: 16'x12' WOOD DECIS

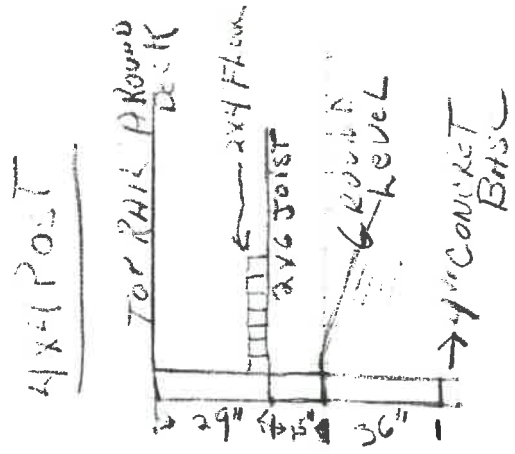
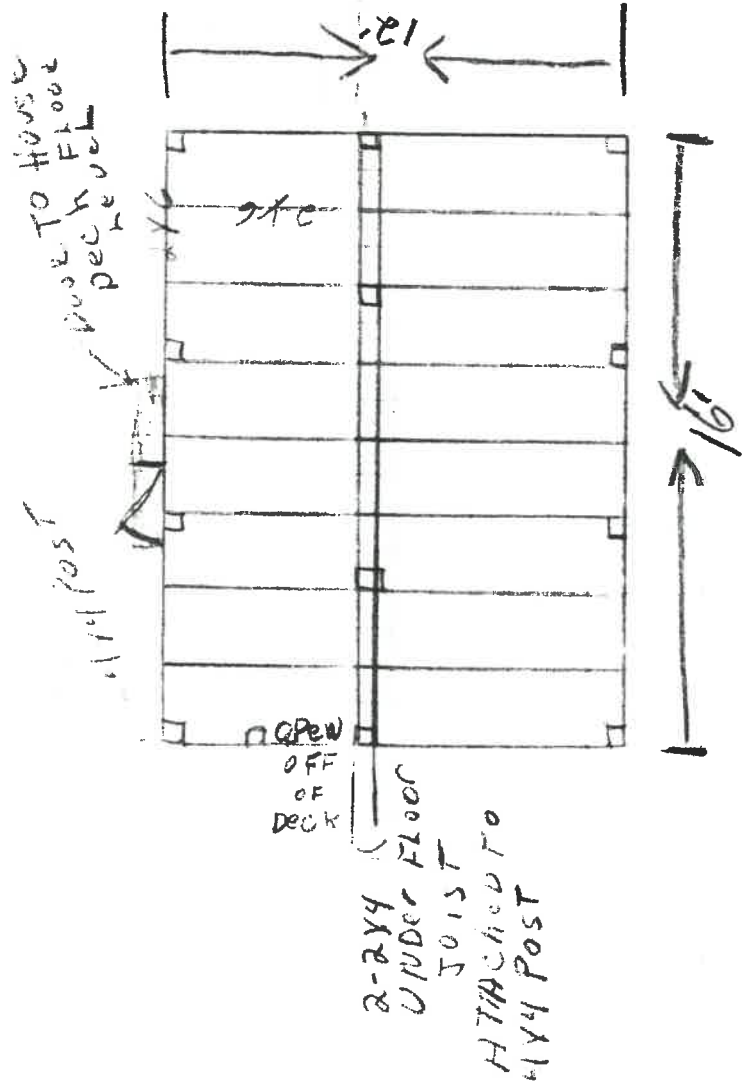
Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_  
owner-agent





RETURNS THIS COPY TO THE APPLICANT

# Tom Hschimmer 12x16 Deck



4x4 TREATED WOULD MINIMIZE



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 785 CRIPPLE CR. Cost of project X \$300.00

Owner's Name TOM ASCHEMEIER Address 785 CRIP. CR.

Contractor X SELF Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

Lot Information: (Not required for siding job)

Lot No. \_\_\_\_\_ Subdivision \_\_\_\_\_

Zoning District A 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 \_\_\_\_\_

(Specific Type)

Brief Description of Work:-----

Size: Length X 16' Width X 12' No. of Stories 1

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: WOOD DECK

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 X 9-27-87 Applicant's Signature X Tom Aschmeier

PERMIT NO.

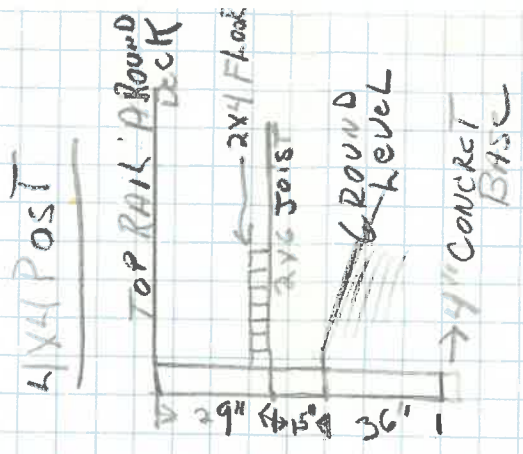
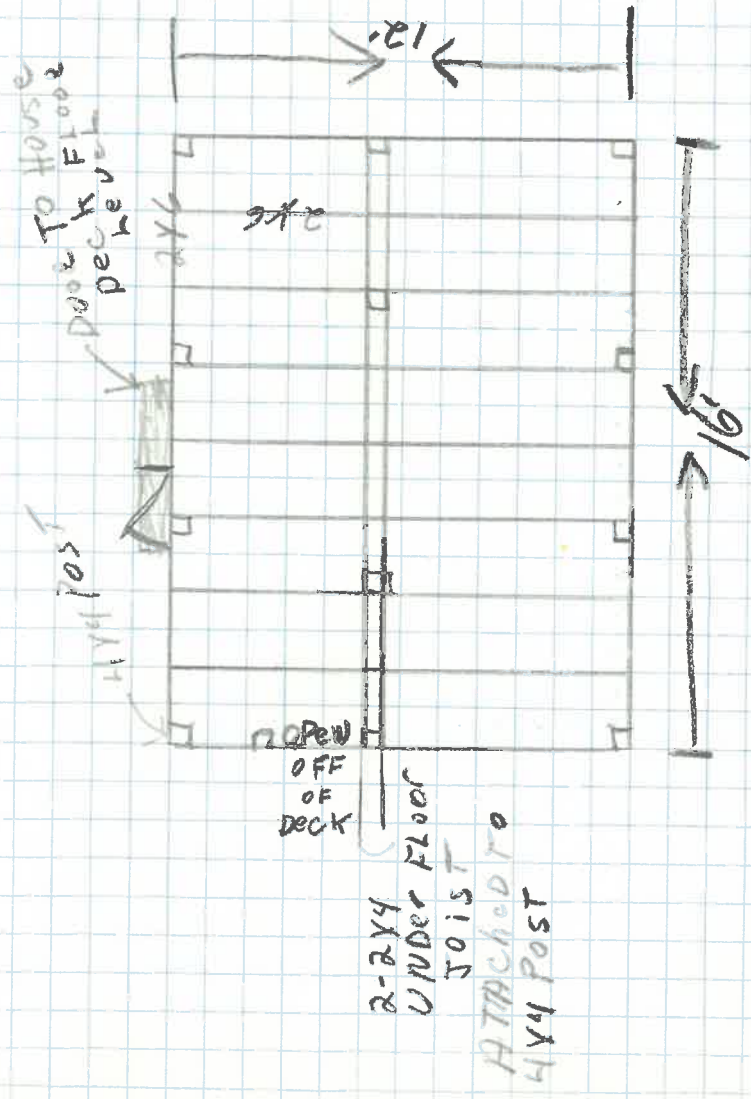
PERMIT FEE \$





# Tom Aschenmier

## 12x16 Deck



4x4 TREATED WOULD MINIMIZE

