

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 822-77 Issued 9/2/77 date
 Job Location 1018 Dodd St. address
 Lot n/a sub-div. or legal discript
 Issued By Ronald P. Sonnenberg building official
 Owner Harvey A. Porter name tel. ✓
 Address 1018 Dodd St.
 Agent Sherm Smith 592-7791 builder-eng.-etc. tel.
 Address Rt. 2 Napoleon, Ohio
 Description of Use Electridal service
entrance
 Residential XXX(1) no. dwelling units
 Commercial _____ Industrial _____
 New _____ Add'n. _____ Alter _____ Remodel XX
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 300.00

FEES	BASE	PLUS	TOTAL
BUILDING			
ELECTRICAL	\$300	---	\$3.00
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			\$3.00
LESS MIN. FEES PAID _____ date			-0-
BALANCE DUE.....			\$3.00

ZONING INFORMATION

n/a

district	lot dimensions	area	front yd	side yds	rear yd
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: Install new 100 amp Electric service entrance.
 brief description
 Plumbing: n/a
 brief description
 Mechanical: n/a
 brief description
 Sign: _____ Dimensions _____ Sign Area _____
 type

Additional Information: All work shall conform to the N.E.C. 1975 edition, NFPA 70.

Date 9-27-77 Applicant Signature Sherm Smith
 owner-agent

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR ELECTRICAL PERMIT
(PLEASE PRINT OR TYPE)

822-77
\$3.00

The undersigned hereby makes application for the installation, replacement, or alteration of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Code for 1, 2 and 3 Family Buildings.

Owner's Name ^{MAVEY} H. A. PORTER Address 1018 DODD
Contractor's Name SHERM SMITH Address RT2 NAP Tel 592 9991

LOT INFORMATION:

Location of Project _____ Zoning District _____

BUILDING INFORMATION:

Single Family Double Family _____ Multiple Family _____
New Construction _____ Existing Addition _____
Replacement Remodel _____ Service Change
Size: Total Square Foot Inc Floor _____ No. of Stories _____

DESCRIPTION OF WORK:

Size of Service 100 AMP Service Change Only YES (Yes or No)

Total Number of New Circuits _____ Total Number of New Circuits
Existing Appliance Circuits _____

APPLIANCE CIRCUITS: (Indicate quantity)

Electric Range _____ Range Hood _____ Clothes Dryer _____ Dishwasher _____
Air Conditioner _____ Attic Fan Blower _____ Room Exhaust Fan _____
Disposal _____ Bat Water Heater _____ Electric Oven _____
Service Equipment Electrical _____ (Yes or No)

Note: G.P. shall be required for all temporary electric with approved ground rod at service.

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS (INCLUDING ELECTRICAL LAYOUT AND WIRING SCHEDULE)

ESTIMATED COST OF COMPLETED PROJECT: 300.00

DATE 9-2-77 APPLICANT'S SIGNATURE Sherm. Smith, Elect. OWNER CONTRACTOR-AGENT

