

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING

255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 581 Date March 15, 1983
 Job Location 1098 Dodd Valuation \$ 5,500.00
 Owner Robert A. Shanks Address 8-271, U.S. 6, Napoleon
 Contractor Robert A. Shanks Telephone No. 599-3713
 Address 8-271, U.S. 6, Napoleon, Ohio
 Electric Contractor _____
 Plumbing Contractor _____
 Mechanical Contractor _____

This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.

Work Information:
 Residential Commercial _____ Industrial _____
No. dwelling units
 New Construction _____ Addition _____ Remodel
 Brief Description of Work Fire damage repair and general remodeling of two suites

ISSUED BY Richard H. Gayman DEPT. OF BUILDING & ZONING
Building Official

It is the owners or contractors responsibility to call the Building Department for the following (x) inspections:

- Footing excavation prior to placing concrete.
- Footing drains and foundation prior to backfill.
- Prepared sub-grade prior to placing concrete floor slab.
- Sanitary sewer
- Rough-in electrical, plumbing and service framing prior to installing wall board.
- Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

PERMIT & FEES	
Building Permit	\$ 18.00
Electrical Permit	\$ 29.00
Plumbing Permit	\$ 13.00
Mechanical Permit	\$ 6.00
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other	\$ _____
TOTAL FEES	\$ 66.00
LESS FEES PAID	\$ -0-
BALANCE DUE	\$ 66.00

PAID
MAR 16 1983

REPORT

CITY OF WASHINGTON - DEPT OF PUBLIC WORKS
100 W. BRADLEY AVENUE, WASHINGTON, D.C. 20004

100

TO: DIRECTOR, DEPARTMENT OF PUBLIC WORKS
FROM: [Illegible Name]
SUBJECT: [Illegible Subject]

The following information was obtained from the records of the Department of Public Works on [illegible date] regarding [illegible subject].

[Illegible text block containing details of the report or findings.]

DATE	DESCRIPTION	AMOUNT
1/1/68	[Illegible]	[Illegible]
2/1/68	[Illegible]	[Illegible]
3/1/68	[Illegible]	[Illegible]
4/1/68	[Illegible]	[Illegible]
5/1/68	[Illegible]	[Illegible]
6/1/68	[Illegible]	[Illegible]
7/1/68	[Illegible]	[Illegible]
8/1/68	[Illegible]	[Illegible]
9/1/68	[Illegible]	[Illegible]
10/1/68	[Illegible]	[Illegible]
11/1/68	[Illegible]	[Illegible]
12/1/68	[Illegible]	[Illegible]
TOTAL		[Illegible]

This report is confidential and its contents should not be disclosed to the public without the express written consent of the Department of Public Works.

PAID
MAR 1 1983
CITY OF WASHINGTON

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 301 Date March 15, 1983
Job Location 1098 Dodd Valuation \$ 5,500.00
Owner Robert A. Shanks Address 8-271, U.S. 6, Napoleon
Contractor Robert A. Shanks Telephone No. 599-3713
Address 8-271, U.S. 6, Napoleon, Ohio
Electric Contractor _____
Plumbing Contractor _____
Mechanical Contractor _____

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Work Information:

Residential Commercial _____ Industrial _____
New Construction _____ Addition _____ Remodel
Brief Description of Work Fire damage repair and general remodeling of two suites

ISSUED BY _____ DEPT. OF BUILDING & ZONING

It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- _____ Footing excavation prior to placing concrete.
- _____ Footing drains and foundation prior to backfill.
- _____ Prepared sub-grade prior to placing concrete floor slab.
- _____ Sanitary sewer
- _____ Rough-in electrical, plumbing and service framing prior to installing wall board.
- _____ Final electrical, plumbing and heating.
- _____ Final building inspection, prior to occupancy.

PERMIT & FEES

Building Permit	\$ <u>18.00</u>
Electrical Permit	\$ <u>29.00</u>
Plumbing Permit	\$ <u>13.00</u>
Mechanical Permit	\$ <u>6.00</u>
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>66.00</u>
LESS FEES PAID	\$ <u>0.00</u>
BALANCE DUE	\$ <u>66.00</u>

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

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 1098 DODD Cost of project 55000⁰⁰

Owner's Name ROBERT A SHANKS Address 8-271-656 NAPOLRON

Contractor SAME AS OWNER Telephone No. 599-3713

Address _____

Lot Information: (Not required for siding job)

Lot No. 13 Subdivision T.S. DODDS 1st

Zoning District C 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 _____

Brief Description of Work: ----- Fire damage repair and (Specific Type)

general remodeling of two units

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 3/11/83 Applicant's Signature [Signature]

PERMIT NO. 561
PERMIT FEE \$ 18.00

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR ELECTRICAL PERMIT
(Please print or type)

The undersigned hereby makes application for installation or replacement of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Codes.

Owner's Name ROBERT A. SHANKS Address 8271 US6 R-5 NAPOLEON

Electrical Contractor ROBERT A. SHANKS Telephone No. 599-3713

Address _____

General Contractor SAME Telephone No. SAME

Address _____

Location of Project 1098 DOPP ST. Cost of Project _____

Work Information:

Residential _____ Commercial _____ Industrial _____

No. Units
New _____ Service Change _____ Rewiring X Additional Wiring X

Brief Description of Work: METER SOCKETS + SERVICE REPLACED 1979 WITH 100 AMP

PANELS I WILL BE ADDING NEW CIRCUITS + WIRING FROM NEW PANELS

Size of proposed service entrance _____ Number of new circuits _____

Type of proposed service entrance _____ Underground _____ Overhead _____

Require Temporary Electric _____ (Yes or No)

Total Floor Area - Commercial and Industrial only _____ sq. ft.

Additional Information: _____

*Ground fault circuit interrupter protection is required on all 120-volt single phase, 15 and 20 amp. Circuits which are part of a temporary electric service: and also on bathroom, outdoor, and garage receptacles in all dwelling units. Art. 220-8 N.E.C.

*Application for permit shall be accompanied by two complete sets of plans including: Electrical layout and riser diagram. (For commercial and industrial work only).

Date 3-11-83

Applicant's Signature [Signature]

PERMIT NO. 581
PERMIT FEE \$ 29.00

CITY OF NAPOLEON
 BUILDING INSPECTION DEPARTMENT
 APPLICATION FOR PLUMBING PERMIT
 (Please print or type)

The undersigned hereby makes application for the installation or replacement of plumbing work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Codes. (1, 2 and 3 family dwelling units only).

Owner's Name ROBERT A. SHANKS Address 8271-USC R-5 NAPOLEON

Plumbing Contractor ROBERT A. SHANKS Telephone No. 599-3713

Address _____

General Contractor SAME Telephone No. SAME

Address SAME

Location of Project 1098 DODD ST. Cost of Project _____

Work Information:

No. of dwelling units 2 New _____ Replacement X Addition _____

Brief description of work: REPLACING FIXTURES WITH NEW

Is water tap required No Size _____ Type of Pipe _____

Is sewer tap required No Size _____ Type of Pipe _____

Type of Water Distribution pipe CPVC

Type of Drainage, Waste and Vent Pipe ABS PLASTIC

Size of main building drain 6" Size of main vent pipe 3"

Water closets 2 Bathtubs 2 1 1/2" Shower — —
No. Trap Size No. Trap Size

Lavatories 2 1 1/2" Kitchen Sink 2 1 1/2" Disposal — —
No. Trap Size No. Trap Size No. Trap Size

Dishwasher — — Clothes Washer 2 1 1/2" Other _____
No. Trap Size No. Trap Size No. Trap Size

PERMIT NO. 581
 PERMIT FEE \$ 13,000

All installations are subject to plumbing tests and/or inspections.

Date 3.11.83 Applicant's Signature [Signature]

100.111 1-20 16

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

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

Owner's Name Robert Shanks Address 8-271-US6RS NAPoleon, Ohio

Contractor's Name Rob Shanks Address 8-271-US6RS NAP. Tel. 599-3713

BUILDING INFORMATION:

Single Family — Double Family X Multiple — New Construction —

Addition — Remodel X Replacement — No. of Stories 2

DESCRIPTION OF WORK

Heating System - Warm Air X Hot Water — Steam — Electric —

Unit Heaters — Unit Gas Heaters — Other —

Type - Gravity — Forced X Radiant —

No. of Thermostatical Heating Zone 1-Per Unit

Hot Water - One Pipe — Two Pipe — Series Loop —

Electric Heat - No. of Circuits — Other —

Total Heat Loss of Area to be Heated APT. #1 31760 BTU APT #2 32105 Btu.

Rated Capacity of Furnace/Boiler — Btu.

No. of Furnaces 2 No. of Hot Air Runs 8

No. of Hot Water Radiators — Type of Fuel —

Heating Units Located: Crawl Space — Floor Level — Suspended —

Roof or Exposed to Outside Air — Attic — Other SEE Below *

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: —

DATE 3-11-83 APPLICANT'S SIGNATURE [Signature]

OWNER-CONTRACTOR-AGENT

* APT. #1 FURNACE LOCATED IN BASMT.

APT. #2 " " FLOOR LEVEL

581
600

