

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

Permit No. 3404 Issued 11/14/94

Job Location 1220 Dodd St.

Lot _____

Issued by Brent N. DAmman

Owner Wes Drain 592-8344

Address 1220 Dodd St. Napoleon, OH

Agent Toledo Fence 535-6833

Address 2525 Hill Ave. Toledo, OH
43607

Use Type - Residential X

Other - Describe _____

No. Dwelling Units _____

New X Replacement _____

Add'n. Alter Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 980.00

| FEES | BASE | PLUS | TOTAL |
|--|---------|---------|----------|
| <input checked="" type="checkbox"/> Building | \$ 9.00 | \$ 9.00 | \$ 18.00 |
| <input type="checkbox"/> Electrical | \$ | \$ | \$ |
| <input type="checkbox"/> Plumbing | \$ | \$ | \$ |
| <input type="checkbox"/> Mechanical | \$ | \$ | \$ |
| <input type="checkbox"/> Demolition | \$ | \$ | \$ |
| <input type="checkbox"/> Zoning | \$ | \$ | \$ |
| <input type="checkbox"/> Sign | \$ | \$ | \$ |
| <input type="checkbox"/> Water Tap | \$ | \$ | \$ |
| <input type="checkbox"/> Sew. Insp. | \$ | \$ | \$ |
| <input type="checkbox"/> Sewer Tap | \$ | \$ | \$ |
| <input type="checkbox"/> Temp. Water | \$ | \$ | \$ |
| <input type="checkbox"/> Temp. Elec. | \$ | \$ | \$ |
| TOTAL FEES..... | | | \$ 18.00 |
| LESS FEES PAID..... | | | \$ |
| BALANCE DUE..... | | | \$ |

ZONING INFORMATION

| district | lot dimensions | | area | front yd | side yd | 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) _____

Electrical: _____

Plumbing: _____

Mechanical: _____

Additional Information: Side and rear yard fence.

Date 11-14-94 Applicant Signature Wes Drain

APPLICATION FOR

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FROM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

| | | | | |
|---|--|-----------------|----------------|-----------------|
| ENTRY NO. _____ | | <u>Base</u> | <u>Plus</u> | <u>Total</u> |
| PERMIT NO. <u>3404</u> ISSUED <u>11-14-94</u> | <input checked="" type="checkbox"/> Building | \$ <u>9.00</u> | \$ <u>9.00</u> | \$ <u>18.00</u> |
| JOB LOCATION <u>1220 Dodd</u> | <input type="checkbox"/> Electrical | \$ _____ | \$ _____ | \$ _____ |
| LOT _____ | <input type="checkbox"/> Plumbing | \$ _____ | \$ _____ | \$ _____ |
| (Subdivision or Legal Description) | <input type="checkbox"/> Mechanical | \$ _____ | \$ _____ | \$ _____ |
| ISSUED BY <u>BND</u> | <input type="checkbox"/> Demolition | \$ _____ | \$ _____ | \$ _____ |
| (Building Official) | <input type="checkbox"/> Zoning | \$ _____ | \$ _____ | \$ _____ |
| OWNER <u>Wes Drain</u> PHONE <u>592-8344</u> | <input type="checkbox"/> Sign | \$ _____ | \$ _____ | \$ _____ |
| ADDRESS <u>1220 Dodd Napoleon</u> | <input type="checkbox"/> Water Tap | \$ _____ | \$ _____ | \$ _____ |
| AGENT <u>Toledo Fe</u> PHONE <u>535-4833</u> | <input type="checkbox"/> Sewer Tap | \$ _____ | \$ _____ | \$ _____ |
| ADDRESS <u>2525 Hill Ave. Toledo</u> | <input type="checkbox"/> Temp Water | \$ _____ | \$ _____ | \$ _____ |
| USE: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <u>43607</u> | <input type="checkbox"/> Temp Elec. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Other _____ | | | | |
| WORK: <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Remodel | | | | |
| ESTIMATED COST = \$ <u>980.00</u> | Additional Plan Review: | Structure _____ | Electric _____ | Hours _____ |

TOTAL FEES \$ 18.00
 Less Fees Paid \$ _____
 BALANCE DUE \$ _____

ZONING INFORMATION

| District | Lot Dimensions | Area | Front Yard | Side Yard | Rear Yard |
|----------|----------------|------|------------|-----------|-----------|
|----------|----------------|------|------------|-----------|-----------|

| Max Height | No. Pkg. Spaces | No. Ldg. Spaces | Max Cover | Petition or Appeal Required-Date |
|------------|-----------------|-----------------|-----------|----------------------------------|
|------------|-----------------|-----------------|-----------|----------------------------------|

WORK INFORMATION

Building: Ground Floor Area _____ sq. ft. Basement Floor Area _____ sq. ft.

Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.

Size: Length _____ Width _____ Stories _____ Height _____

Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: side + rear yard fence.

ELECTRICAL: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: () New () Service Change () Rewiring () Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes () No
Size of Service _____ Underground _____ Overhead _____ Number of New Circuits _____

Description of Work: _____

PLUMBING: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

WATER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Water Dist. Pipe _____

SANITARY SEWER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____

STREET SEWER TAP REQUIRED - () Yes () No 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 = _____
Clothes Washer = _____ Floor Drains = _____ Dishwasher = _____ Other _____ Total = _____

Description of Work: _____

MECHANICAL: Contractor _____ Phone _____
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 _____

NUMBER OF HEAT ZONES = _____ HOT WATER - () One (1) Pipe () Two (2) Pipes () Series Loop

ELECTRIC HEAT - Number of Circuits _____ Number of Furnaces _____ Number of Hot Air Runs _____

Number of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____

LOCATION OF HEATING UNITS - () Crawl Space () Floor Level () Attic () Suspended () Roof () Outside

Description of Work: _____

DRAWINGS REQUIRED: All applications must be accompanied by two (2) complete sets of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall be drawn to scale, show all existing structure on the Site Plans, and 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 Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

Signature of Applicant _____ **Date** _____