

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

Permit No. 2737 Issued 8-20-92  
 Job Location 560 Euclid  
 Lot \_\_\_\_\_  
 Issued by Brent N. Damman  
 Owner Paul Shartzter 592-5177  
 Address 560 Euclid, Napoleon, Ohio  
 Agent Self  
 Address \_\_\_\_\_  
 Use Type - Residential x  
 Other - Describe \_\_\_\_\_  
 No. Dwelling Units 1  
 New Replacement  
 Add'n. Alter Remodel x  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 500.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> Building	\$ 9.00	\$	\$ 9.00
<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.....			\$ 9.00
LESS FEES PAID. 8-20-92....			\$ 9.00
BALANCE DUE.....			\$ 0.00

ZONING INFORMATION

district	lot dimensions		area	front yd	side yd	rear yd
A						
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: \_\_\_\_\_

**PAID**

AUG 10 1992

CITY OF NAPOLEON

Additional Information: Reside storage shed.

Date 8-20-92 Applicant Signature Paul Shartzter



APPLICATION FOR  
RESIDENTIAL, BUILDING, ELECTRICAL, PLUMBING, AND MECHANICAL PERMITS 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. \_\_\_\_\_

PERMIT NO. 2737 ISSUED 8-20-92

	<u>BASE</u>	<u>PLUS</u>	<u>TOTAL</u>
<input checked="" type="checkbox"/> BUILDING	\$ <u>9.00</u>	\$ _____	\$ <u>9.00</u>

JOB LOCATION 560 Euclid

<input type="checkbox"/> ELECTRICAL	\$ _____	\$ _____	\$ _____
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LOT \_\_\_\_\_  
(Subdivision or Legal Description)

<input type="checkbox"/> PLUMBING	\$ _____	\$ _____	\$ _____
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ISSUED BY BND  
(Building Official)

<input type="checkbox"/> MECHANICAL	\$ _____	\$ _____	\$ _____
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OWNER Paul Shartz PHONE 592-5177

<input type="checkbox"/> DEMOLITION	\$ _____	\$ _____	\$ _____
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ADDRESS 560 Euclid

<input type="checkbox"/> ZONING	\$ _____	\$ _____	\$ _____
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AGENT Self PHONE \_\_\_\_\_

<input type="checkbox"/> SIGN	\$ _____	\$ _____	\$ _____
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ADDRESS \_\_\_\_\_

<input type="checkbox"/> WATER TAP	\$ _____	\$ _____	\$ _____
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USE - RESIDENTIAL \_\_\_\_\_ OTHER \_\_\_\_\_

<input type="checkbox"/> SEWER TAP	\$ _____	\$ _____	\$ _____
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COMMERCIAL \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_ NEW \_\_\_\_\_ ADD'N \_\_\_\_\_

<input type="checkbox"/> TEMP WATER	\$ _____	\$ _____	\$ _____
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REPLACEMENT \_\_\_\_\_ REMODEL  MIXED OCCUPANCY \_\_\_\_\_

<input type="checkbox"/> TEMP ELEC	\$ _____	\$ _____	\$ _____
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ESTIMATED COST - \$ 500.00

Additional Plan Review -	Structure Electric _____	Hours _____
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TOTAL FEES . . . . .	\$ <u>9.00</u>
Less Fees Paid (Date) _____	\$ <u>9.00</u>
BALANCE DUE . . . . .	\$ _____

ZONING INFORMATION

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard
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<u>A</u>					
Max. Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition Or Appeal Required - Date	

WORK INFORMATION

BUILDING - GARAGE FLOOR AREA \_\_\_\_\_ SQ.FT. - BASEMENT FLOOR AREA \_\_\_\_\_ SQ. FT. - 2ND FLOOR AREA \_\_\_\_\_ SQ.FT.

SIZE - LENGTH \_\_\_\_\_ - WIDTH \_\_\_\_\_ - STORIES \_\_\_\_\_ - GROUND FLOOR AREA \_\_\_\_\_ SQ. FT.

HEIGHT \_\_\_\_\_ - BUILDING VOLUME (FOR DEMOLITION PERMIT) \_\_\_\_\_ CUBIC FEET

DESCRIPTION OF WORK: reside storage shed

**ELECTRICAL:** Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ ESTIMATED COST = \$ \_\_\_\_\_

**TYPE OF WORK:** New \_\_\_\_\_ Service Change \_\_\_\_\_ Rewiring \_\_\_\_\_ Add'l Wiring \_\_\_\_\_ TEMPORARY ELECTRIC 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 = \_\_\_\_\_ Other (Fixture/Type) - \_\_\_\_\_

**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 \_\_\_\_\_