

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

Permit No. <u>3902</u> Issued <u>05/14/96</u>		FEEES	BASE	PLUS	TOTAL
Job Location <u>410 Fair St.</u>	[]	Building	\$	\$	\$
Lot _____	[X]	Electrical	\$	\$ 6.00	\$ 6.00
Issued by <u>Brent N. Damman</u>	[]	Plumbing	\$	\$	\$
Owner <u>Ruth Delaney</u>	[X]	Mechanical	\$	\$ 5.00	\$ 5.00
Address <u>410 Fair St.</u>	[]	Demolition	\$	\$	\$
Agent <u>Fitzenrider, Inc.</u> <u>419/784-0828</u>	[]	Zoning	\$	\$	\$
Address <u>827 Perry St.</u>	[]	Sign	\$	\$	\$
Use Type - Residential <u>X</u>	[]	Water Tap	\$	\$	\$
Other - Describe _____	[]	Sew. Insp.	\$	\$	\$
No. Dwelling Units _____	[]	Sewer Tap	\$	\$	\$
New <u>X</u> Replacement _____	[]	Temp. Water	\$	\$	\$
Add'n. <u>Alter</u> <u>Remodel</u> _____	[]	Temp. Elec.	\$	\$	\$
Change of Occupancy _____	TOTAL FEES.....\$ 11.00				
Estimated Cost \$ <u>1700.00</u>	LESS FEES PAID.....\$ 11.00				
BALANCE DUE.....\$ -0-					

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) _____

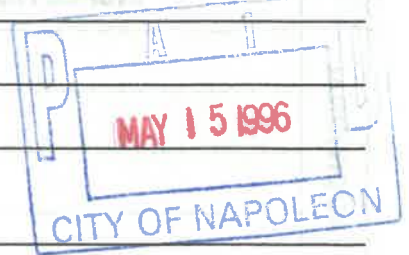
Electrical: _____ Add on A/C _____

Plumbing: _____

Mechanical: _____

Additional Information: _____

Date _____ Applicant Signature _____



INSPECTION RECORD

UNDERGROUND			ROUGH-IN						FINAL			
Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By	
PLUMBING	Building Drains		Drainage, Waste & Vent Piping			Indirect Waste			Drainage, Waste & Vent Piping			
	Water Piping								Backflow Prevention			
	Building Sewer		Water Piping			Condensate Lines			Water Heater			
	Sewer Connection								FINAL APPROVAL			
MECHANICAL	Refrigerant Piping		Refrigerant Piping			Chimney(s)			Grease Exhaust System			
			Duct Furnace(s)			Fire Dampers			Air Cond. Unit(s)			
	Ducts/Plenums		Ducts/Plenums			<input type="checkbox"/> Radiant Htr(s) <input type="checkbox"/> Unit Htr(s)			Refrigeration Equipment			
			Duct Insulation			Pool Heater			Furnace(s)			
			Combustion Products Vents			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.			FINAL APPROVAL			
ELECTRICAL	Conduits & or Cable		Conduits/ Cable			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			Temp Service Temp Lighting			
	Grounding & or Bonding		Rough Wiring			<input type="checkbox"/> Generator(s) <input type="checkbox"/> Motors			Fixtures Lampholders			
	Floor Ducts Raceways		Service Panel Switchboard			<input type="checkbox"/> Water Htr <input type="checkbox"/> Welder			Signs			
	Service Conduit		Busways Ducts			<input type="checkbox"/> Heaters <input type="checkbox"/> Heat Cable			Electric Mtr. Clearance			
	Temporary Power Pole		Subpanels			<input type="checkbox"/> Duct Htr(s) <input type="checkbox"/> Furnace(s)			FINAL APPROVAL			
BUILDING	Location, Set-backs, Esmt(s)		Exterior Wall Construction			Roof Covering Roof Drainage			Smoke Detector			
	Excavation					Exterior Lath			Demolition (sewer cap)			
	Footings & Reinforcing					<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard						
	Floor Slab		Interior Wall Construction			Fire Wall(s)			Building or Structure			
	Foundation Walls		Columns & Supports			Fireplace Chimney						
	Sub-soil Drain		Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access						
	Piles		Floor System(s)						FINAL APPROVAL BLDG. DEPT.			
			Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued			
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					

MAY 12 1988

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. _____

PERMIT NO. 3902 ISSUED 5-14-96

JOB LOCATION 410 FAIR ST

LOT _____
(Subdivision or Legal Description)

ISSUED BY BND
(Building Official)

OWNER Ruth Delaney PHONE _____

ADDRESS 410 FAIR ST

AGENT Fitznerider Inc. PHONE 419-784-0828

ADDRESS 827 PERRY ST.

USE: () Residential () Commercial () Industrial
() Other _____

WORK: () New () Addition () Replacement () Remodel

ESTIMATED COST = \$ 1700.00

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
() Building	\$ _____	\$ _____	\$ _____
(<input checked="" type="checkbox"/>) Electrical	\$ _____	\$ <u>6.00</u>	\$ <u>6.00</u>
() Plumbing	\$ _____	\$ _____	\$ _____
(<input checked="" type="checkbox"/>) Mechanical	\$ _____	\$ <u>5.00</u>	\$ <u>5.00</u>
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
() Water Tap	\$ _____	\$ _____	\$ _____
() Sewer Tap	\$ _____	\$ _____	\$ _____
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Structure _____ Hours _____
Plan Review: Electric _____ Hours _____

TOTAL FEES \$ 11.00
Less Fees Paid \$ _____
BALANCE DUE \$ 11.00

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>

<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Ldg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>

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: addon A/C



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 _____