

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01468 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. [REDACTED] Issued 10-9-87
date

Job Location 215 FIFTH ST
address

Lot 12 SPRINGWELL ADD
sub-div or legal discript

Issued By 5
building official

Owner KEN REZZIG
name tel.

Address 215 FIFTH ST

Agent MIKE RUSTER MILLER 599-4296
builder-eng.-etc. tel.

Address 1079 0000

Description of Use RESIDENCE

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 5000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	25.75	31.75
<input checked="" type="checkbox"/> ELECTRICAL	10.00	2.00	12.00
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			43.75
LESS MIN. FEES PAID _____			
BALANCE DUE.....			

ZONING INFORMATION

district <u>A</u>	lot dimensions <u>90' x 82.5'</u>	area <u>7425 S.F.</u>	front yd <u>25' EXISTING</u>	side yds <u>L-16.3' R-3'</u>	rear yd <u>23'</u>
max hgt <u>35'</u>	no pkg spaces <u>2-MIN</u>	no ldg spaces	max cover <u>35%</u>	petition or appeal req'd <u>BZA 21-87</u>	date appr

3' SIDE YARD SETBACK

WORK INFORMATION:

Size: Length 16' Width 12' Stories 1 Ground Floor Area 192 S.F.

Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: 1-ADDITIONAL CIRCUIT FED FROM THE EXISTING PANEL
brief description

Plumbing: N.A.
brief description

Mechanical: N.A.
brief description

Sign: N.A. Dimensions _____ Sign Area _____
type

Additional Information: MIN CEILING HT: = 7'-6" SEE PLAN CORRECTION SHEET

Date _____ Applicant Signature _____
owner-agent

RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON
255 West Riverview Ave.
Napoleon, Ohio 43545
419/592-4010

ADDENDUM TO Permit No. 01468-(1)
Owner KEN RETZIG
Contractor MIKE AUVERMILLER
Location 215 FIFTH ST.

Please note the items checked below and incorporate them into your plans as indicated: PERMIT NOT YET ISSUED, CORRECT PLANS AND RE-SUBMIT. PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL			
<input type="checkbox"/>	Provide approved smoke detector(s) as req'd.	<input type="checkbox"/>	Show size of members supporting porch roof.
<input type="checkbox"/>	Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.	<input type="checkbox"/>	Provide double top plate for all bearing partitions and exterior walls.
<input type="checkbox"/>	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)	<input type="checkbox"/>	Provide design data for prefab wood truss.
<input type="checkbox"/>	Submit fully dimensioned plot plan.	<input type="checkbox"/>	Ceiling joists undersized in _____
<input type="checkbox"/>	Provide min. of 1-3'0" x 6'8" exit door.	<input type="checkbox"/>	Roof rafters undersized in _____
<input checked="" type="checkbox"/>	Provide min. 22" x 30" attic access opening.	PLUMBING AND MECHANICAL	
<input type="checkbox"/>	Provide min. 18" x 24" crawl space access opening.	<input type="checkbox"/>	Terminate all exhaust systems to outside air.
<input type="checkbox"/>	Provide approved sheathing or flashing behind masonry veneer.	<input type="checkbox"/>	Insulate ducts in unheated areas.
<input type="checkbox"/>	Provide min. 15# underlayment on roof.	<input type="checkbox"/>	Provide backflow prevention device on all hose bibs.
<input type="checkbox"/>	Provide adequate fireplace hearth.	<input type="checkbox"/>	Terminate pressure and temperature relief valve drain in an approved manner.
<input type="checkbox"/>	Install factory built fireplaces/stoves according to manufacturers instructions.	<input type="checkbox"/>	Provide dishwasher drain with approved air gap device.
<input type="checkbox"/>	Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.	METAL VENEERS	
LIGHT AND VENTILATION		<input type="checkbox"/>	Contact City Utilities Dept. to remove conductors and/or meter.
<input type="checkbox"/>	Provide mechanical exhaust or window in bathroom	<input type="checkbox"/>	Provide approved system of grounding and bonding.
<input checked="" type="checkbox"/>	Provide min. <u>185</u> Sq. In. net free area attic ventilation.	ELECTRICAL	
<input type="checkbox"/>	Provide min. _____ Sq. In. net free area crawl space ventilation.	<input type="checkbox"/>	Show location of service entrance panel and service equipment panel.
FOUNDATION		<input type="checkbox"/>	G. F. C. I. req'd. on temporary electric.
<input checked="" type="checkbox"/>	Min. depth of foundation below finished grade is 32".	<input checked="" type="checkbox"/>	Outdoor, bathroom and garage receptacles shall be protected by <u>G. F. C. I.</u>
<input type="checkbox"/>	Min. size of footer _____" x _____"	<input type="checkbox"/>	Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.
<input type="checkbox"/>	Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.	<input type="checkbox"/>	Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.
<input type="checkbox"/>	Show size of basement columns.	INSPECTIONS	
FRAMING		The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.	
<input type="checkbox"/>	Show size of wood girder in _____	<input checked="" type="checkbox"/>	Footers and Setbacks.
<input type="checkbox"/>	Provide design data for structural member in _____	<input checked="" type="checkbox"/>	Foundation.
<input type="checkbox"/>	Floor joists undersized in _____	<input type="checkbox"/>	Plumbing rough-in.
<input type="checkbox"/>	Provide double joists under parallel bearing partitions.	<input checked="" type="checkbox"/>	Plumbing final.
<input checked="" type="checkbox"/>	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.	<input checked="" type="checkbox"/>	Electrical service.
<input type="checkbox"/>	Show size of headers for openings over 4' wide _____	<input checked="" type="checkbox"/>	Electrical rough-in.
		<input checked="" type="checkbox"/>	Electrical final
			Building sewer.
			HVAC rough-in.
			Final Building other,
			<u>BUILDING</u>
			<u>FRAMING</u>

Additional Corrections: ANCHOR BOLTS TO BRICK WALL WITH ANCHOR BOLTS

The approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No. 01468 and made a part thereof. DATE APPROVED OR DISAPPROVED 10-9-87 Checked by E. LOON HUBER
Plan Examiner.

DATE RECHECKED AND APPROVED _____

Checked by _____

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

DIG FOOTER
MONDAY

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 215 FIFTH ST. Cost of project \$5,000

Owner's Name Ken Rettig Address 215 FIFTH ST.

Contractor Mike Auster Miller Telephone No. 599-4296

Address 1079 DODD ST. NAPOLEON.

Lot Information: (Not required for siding job)

Lot No. 12 Subdivision SPRINGWELL

Zoning District A Lot Size 88 ft. X 82'6 ft. Area 7260 sq. ft.

Setbacks: Front 23'7 Right Side 15 Left Side 15 Rear _____

Work Information:

Residential Commercial _____ Industrial _____

New Construction _____ Addition Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: ----- BUILD SCREENED PATIO (Specific Type)

Size: Length 16' Width 12' No. of Stories 1

Area: 1st Floor 192 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 10-8-87

Applicant's Signature Mike Auster Miller

PERMIT NO. 01468

PERMIT FEE \$ 31.25

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 Ken Rettig Address 215 FIFTH ST.

Electrical Contractor Ken Rettig Telephone No. 599-2741

Address SAME

General Contractor Mike Auster Miller Telephone No. 599-4296

Address 1079 DODD ST. NAPOLEON

Location of Project 215 FIFTH ST. Cost of Project _____

Work Information:

Residential ✓ Commercial _____ Industrial _____
No. Units _____

New _____ Service Change _____ Rewiring _____ Additional Wiring ✓

Brief Description of Work: Add 3 receptacles and light.

Size of proposed service entrance _____ Number of new circuits 1

Type of proposed service entrance _____ Underground _____ Overhead _____

Require Temporary Electric NO (Yes or No)

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

Additional Information: _____

PERMIT NO. 0 1468

PERMIT FEE \$ 12.00

*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).

ate 10-8-87

Applicant's Signature Mike Auster Miller

FIELD CORRECTION NOTICE

LOCATION 215 FIFTH ST.

PERMIT NO. 01468

ISSUED TO MIKE AUSTERMILLER

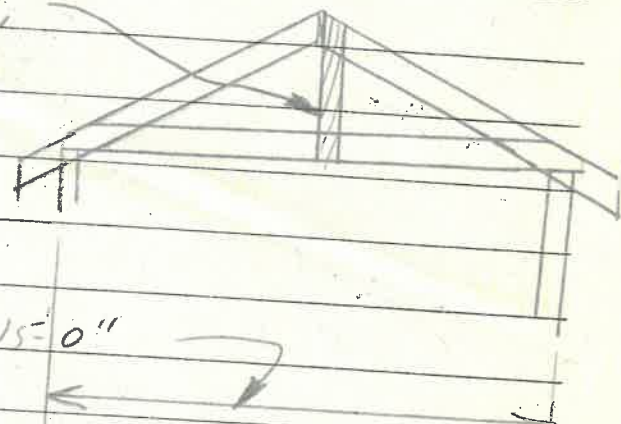
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES.

NOTICE DELIVERED TO MIKE AUSTERMILLER 1079 0000

Upon inspection, violations of the C.A.B.O.

Sec. TABLE 7-B were in evidence.

The following orders are hereby issued for their correction: INSTALL 1x4 TIES @ 16" O.C. BETWEEN THE RAFTERS AT THE RIDGE AND THE CEILING JOISTS.



NOTE: MAX SPAN FOR 2x6

SPF CEILING JOISTS @ 16" O.C.

ROOF PITCH OVER $\frac{3}{12}$ = 13'-3"

ACTUAL SPAN FOR THIS STRUCTURE = 15'-0"

PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED AND MUST BE CORRECTED ON OR BEFORE CALL FOR FINAL INSPECTION WHEN COMPLETE

DATE 1-20-87

BY ELOON HUBER
INSPECTOR

PINK - ORIGINAL COPY WHITE - FIELD COPY YELLOW - FILE COPY

