

PERMIT

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

233

Permit No. _____ Date April 22, 1981

Job Location 717 First St. Valuation \$ 5,000.00

Owner Mildred Rantz Address 717 First St.

Contractor ASCOR Name _____ Address _____ Telephone No. 592-4232

Address 712 Welsted, 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 _____

New Construction _____ Addition _____ Remodel

Brief Description of Work Install solid vinyl siding on home and unattached garage cover trim, install rain gutters

ISSUED BY [Signature] Building Official DEPT. OF BUILDING & ZONING

PAID
APR 24 1981
CITY OF NAPOLEON

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>3.00</u>
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>3.00</u>
LESS FEES PAID	\$ <u>-0-</u>
BALANCE DUE	\$ <u>3.00</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.

INSPECTION RECORD

UNDERGROUND		ROUGH-IN & FINAL			
Type	Date	By	Type	Date	By
PLUMBING	Sewer Connection		Drainage, W. & Vent		
	Building Sewer		Water Piping		
	Water Piping		Condensate Lines		
			Indirect Waste		
ELECTRICAL	Floor Ducts Raceways		Rough Wiring		FINAL APPROVAL
	Conduits & or Cable		Conduits/Cable		Electric Mtr. Clearance
	Grounding & or Bonding		Service Panel Switchboard		Signs
			Subpanels		
MECHANICAL	Refrigerant Piping		Refrigerant Piping		FINAL APPROVAL
	Ducts/Plenums		Ducts/Plenums		Duct Insulation
			Ventilation Supply		Chimney(s)
			Exhst.		Furnace(s)
BUILDING	Location, Set-backs, Esmt(s)		Wall Construction		FINAL APPROVAL
	Excavation		Crawl Space		Fireplace Chimney
	Footings & Reinforcing		Floor System(s)		Attic
	Sub-soil Drain		Roof System		Special Insp Reports Rec'd
	Foundation Walls		Fire Wall(s)		Smoke Detector
	Floor Slab		Roof Cover. Roof Drain		Demolition (sewer cap)
	FINAL APPROVAL BLDG. DEPT		Certificate of Occupancy Issued		Building or Structure
					# <i>DEC 8-26-81</i>

PERMIT

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

Permit No. 233 Date April 22, 1981
Job Location 717 First St. Valuation \$ 5,000.00
Owner Mildred Rentz Address 717 First St.
Contractor ASCON Name Address 712 Welsted, Napoleon, Ohio Telephone No. 592-4232
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 _____
New Construction _____ Addition _____ Remodel
Brief Description of Work Install solid vinyl siding on home and unattached garage cover trim, install rain gutters

ISSUED BY Richard B. Hagman
Building Official (RN)

DEPT. OF BUILDING & ZONING
PAID
APR 24 1981

CITY OF NAPOLEON

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>3.00</u>
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other	\$ _____
TOTAL FEES	\$ <u>3.00</u>
LESS FEES PAID	\$ <u>-0-</u>
BALANCE DUE	\$ <u>3.00</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 alternation 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 717 1st St. Cost of Project \$5000⁰⁰

Owner's Name MILDRED RENTZ Address 717 FIRST ST.

Contractor ASCON Telephone No. 592-4232

Address 712 WELSTED NAPOLEON, Ohio

Lot Information: (not required for siding job)

Lot No. _____ Subdivision _____

Zoning District _____ 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: INSTALL SOLID VINYL SIDING ON HOME
AND UNATTACHED GARAGE - COVER TRIM INSTALL RAIN GUTTERS

Size: Length _____ Width _____ No. of Stories _____

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Building _____ 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 4-21-81 Applicant's Signature [Signature]

PERMIT NO.

233

304

