

PERMIT

City of Napoleon
255 W. Riverview
Napoleon, OH 43545

Division of Building and Zoning
PH (419) 592-4010
FAX (419) 599-8393

Permit No: 002171

Date Issued: 05-18-04

Issued by: BND

Job Location: 417 FREEDOM DRIVE

Est. Cost:

Lot #:

Subdivision Name:

Owner: LEITNER, ROBERT
Address: 2 LAKEVIEW DR
CSZ: NAPOLEON, OH 43545
Phone: 419-592-2567

Agent: SELF
Address:
CSZ:
Phone:

Use Type – Residential:

Other:

ZONING INFORMATION

Dist:	Lot Dim:	Area:	Fyrd:	Syrd:	Ryrd:
Max HT:	# Pkg	Spaces:		# Loading SP:	Max Lot Cov:

BOARD OF ZONING APPEALS:

Work Type – New:	Replmnt:	Addn'n:	Alter:	Remodel:
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WORK INFORMATION

Size - Lgth:	Width:	Stories:	Living Area SF:
Garage Area SF:	Height:	Bldg Vol Demo Permit:	

WORK DESCRIPTION

SEWER INSPECTION
WATER TAP

FEE DESCRIPTION

SEWER INSPECTION PER
WATER TAP PERMIT

PAID DATE	FEE AMOUNT DUE
05-18-04	100.00
05-18-04	650.00



Total Fees Due 750.00

5/18/04
Date

Robert Leitner
Applicant Signature

City of Napoleon

Water Meter Yoke Release Form

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" WATER METER YOKE ASSEMBLY
(Please pickup at City Operations Department 1775 Industrial Drive).

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Owner Phone: 419-592-2567

Contractor: SELF

Address:

Phone:

Water Tap Size 1" X 1.5" _____ 2" _____ Other _____

Water Meter Yoke Size 5/8" X 3/4" _____ 1" _____ Other _____

New Structure X Existing Structure _____ Lawn Meter _____

WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING OF 1" MINIMUM SIZE.

Backflow Device Required Yes X No _____

Type of Backflow Required: DCUA

Water Meter Yoke Installation is subject to the following conditions

- 1.) Must be located in an accessible area.
- 2.) Must be in an area which is not subject to freezing temperatures.
- 3.) Must be at least 18" above floor level (no crawl space installations).
- 4.) Must comply with minimum mounting requirements (drawing available)

Issued By _____ Received By _____

1 Copy to: Building Dept, Water Dept, and Utilities Dept

CITY OF NAPOLEON GENERAL PERMIT APPLICATION
THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL,
PLUMBING, MECHANICAL, DEMILITIONS, REMODELING

Date 5/18/04 Job Location 417 Freedom

Owner Robert Leitner Phone 592-2567

Owner Address 2# Lakeview City Napoleon Zip 43545

Contractor _____ Phone _____

Description of work to be performed _____

Estimated cost of work to be performed _____

Please indicate the type of work you will be performing by

- | | |
|---|--|
| <input type="checkbox"/> A/C Add On | <input type="checkbox"/> Remodeling |
| <input type="checkbox"/> Boiler Replacement | <input type="checkbox"/> Roofing |
| <input type="checkbox"/> Curbing | <input type="checkbox"/> Sewer Repairs |
| <input type="checkbox"/> Decks | <input type="checkbox"/> Sidewalk |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Siding |
| <input type="checkbox"/> Electrical Service Upgrade | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Electrical Service New | <input type="checkbox"/> Storage Shed |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Street Bond |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Furnace Replacement | <input type="checkbox"/> Temp Electric |
| <input type="checkbox"/> Furnace New | <input type="checkbox"/> Water Tap |
| <input type="checkbox"/> Lawn Meter | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Zoning |
| <input type="checkbox"/> Others | |

_____ Permit Number

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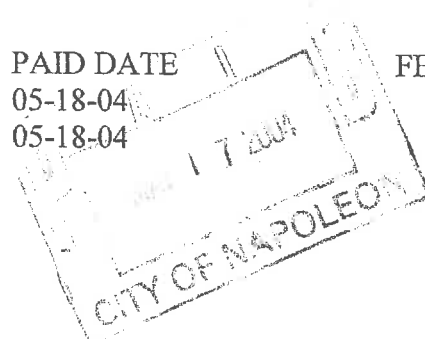
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Size - Lgth:	Width:	Stories:	Living Area SF:
Garage Area SF:	Height:	Bldg Vol Demo Permit:	

WORK DESCRIPTION

SEWER INSPECTION
WATER TAP

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
SEWER INSPECTION PER	05-18-04	100.00
WATER TAP PERMIT	05-18-04	650.00



Total Fees Due 750.00

5/18/04
Date

Robert Leitner
Applicant Signature

City of Napoleon Inspection Form

Permit #002171

Date Issued: 05-18-2004

Job Location: 417 FREEDOM DRIVE

Owner: LEITNER, ROBERT

Owner Phone: 419-592-2567

Contractor: SELF

Contractor Phone:

Work Description: SEWER INSPECTION / WATER TAP

Plumbing: UNDGR _____ RGHIN _____ FINAL _____

SEWER INSP 6-1-04

Mechanical: UNDGR _____ RGHIN _____ FINAL _____

FURNACE REPLAC _____ AIR COND _____

Electrical: UNDGR _____ RGHIN _____ FINAL _____

SEVR UPGR _____

Building: Site _____ FTG _____ FNDT _____

STRU _____ ROOF _____ EXT _____

VENT _____ ACCES _____ EGRS _____

SMKDT _____ FINAL _____

ISSUE TEMP OCCUP _____ ISSUE OCCUP _____

STGE Shed: SITE _____ FINAL _____

Sign: FTG _____ FINAL _____

Fence: SITE _____ FINAL _____

MISC INSP: _____

NOTES: _____

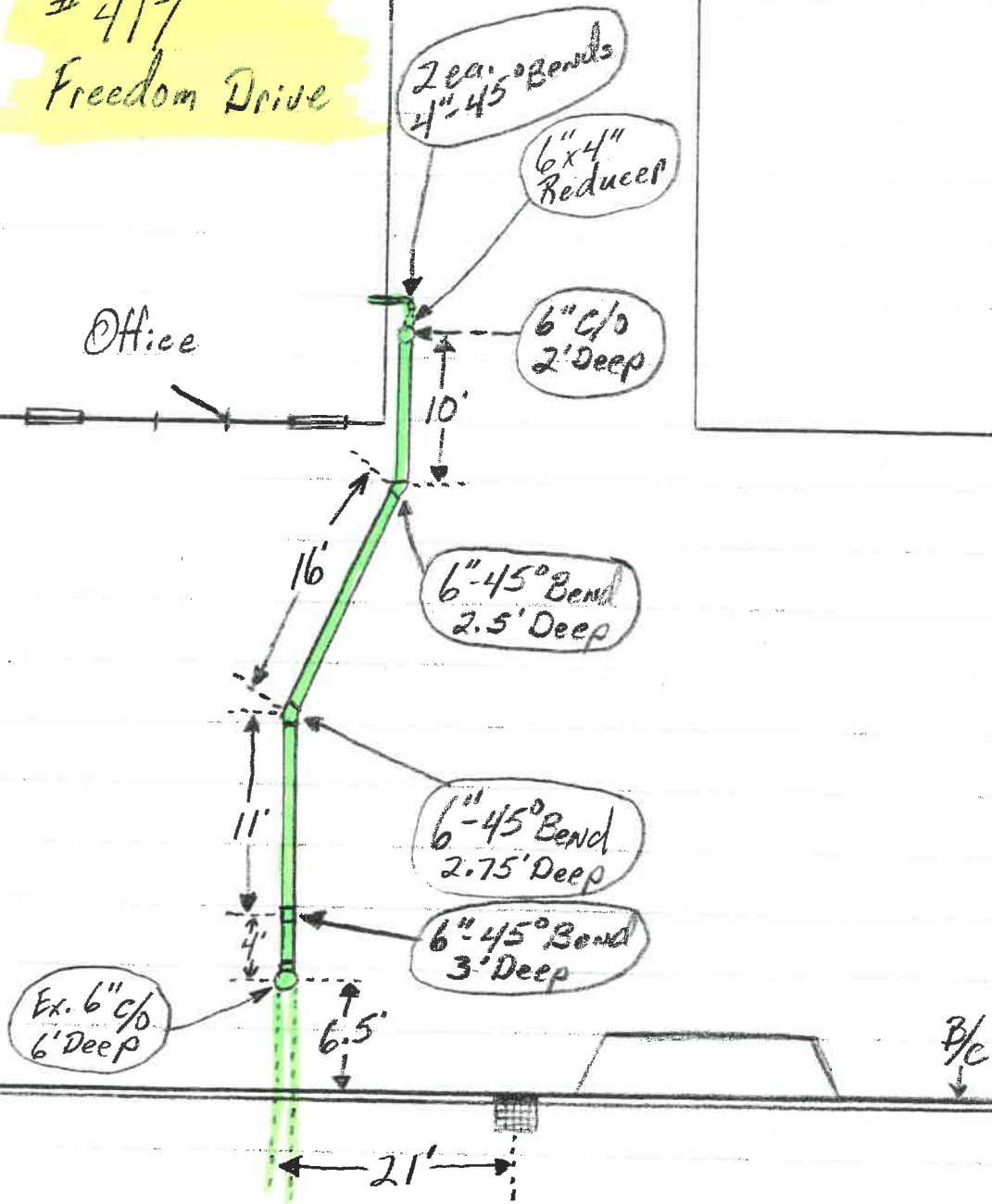
INSPECTORS INITIALS: RLM

Mini Storage

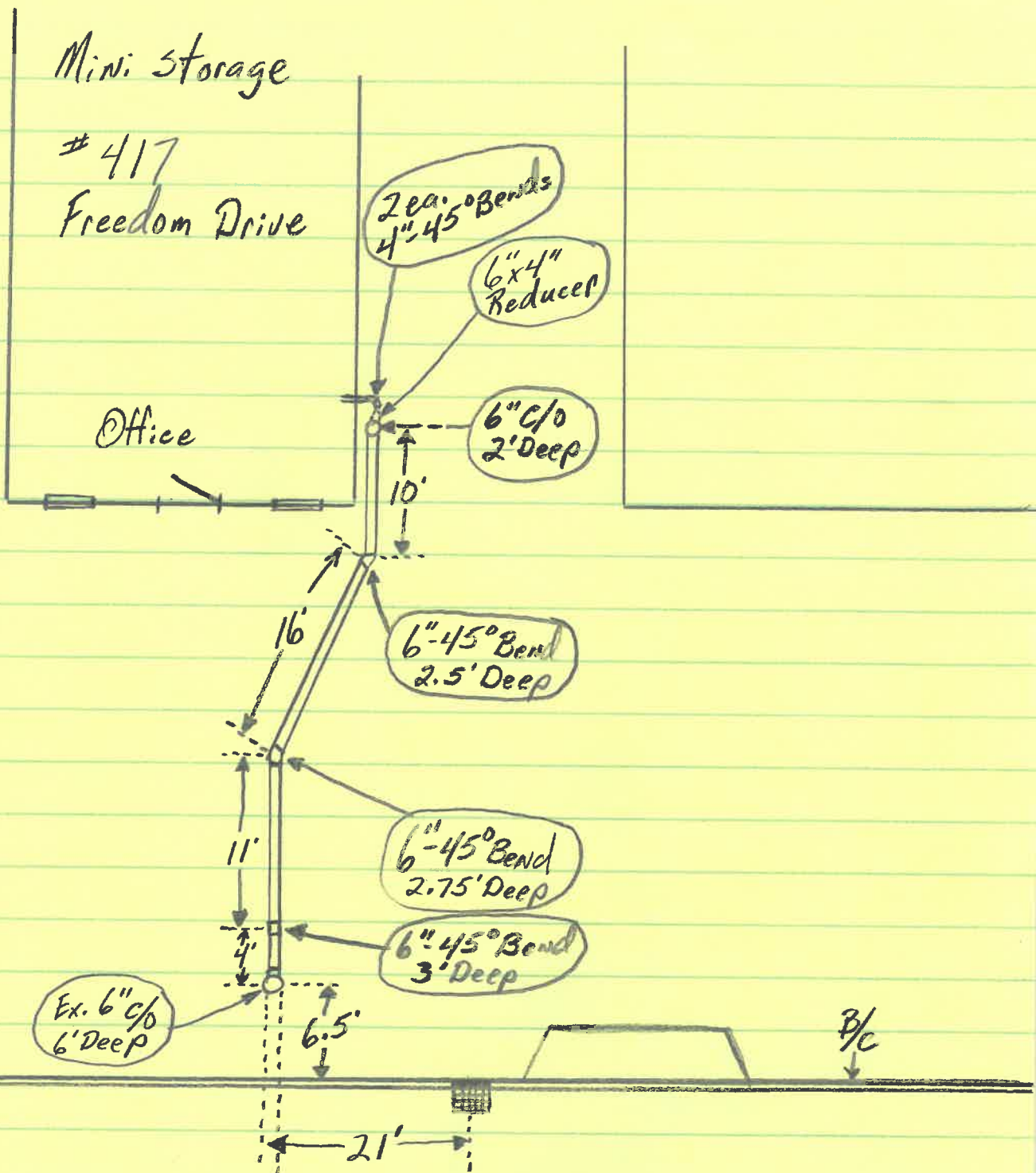
417

Freedom Drive

Office



Date Installed: 6-2-04
Installed by: Nagel Plg. + Htg.
Inspected by: Rex Moll



Date Installed: 6-2-04
 Installed by: Nagel Plg. + Htg.
 Inspected by: Rex Moll

