

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING

255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 773 Date Feb. 13, 1984

Job Location 419 E. Front Valuation \$ _____
Address

Owner Don Crampton Address 1462 Ohio
Name

Contractor " " Telephone No. 599-3782
 Address 1462 Ohio, 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 X Commercial _____ Industrial _____
No. dwelling units

New Construction _____ Addition _____ Remodel _____

Brief Description of Work Remove or demolish single family structure

ISSUED BY Richard J. Gaysman DEPT. OF BUILDING & ZONING
Building Official

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>10.00</u>
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>10.00</u>
LESS FEES PAID	\$ <u>-0-</u>
BALANCE DUE	\$ <u>10.00</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.

PAID
FEB 15 1984
CITY OF NAPOLEON

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PAID
FEB 15 1984
CITY OF NAPOLEON

2/9/84 Demo Started

INSPECTION RECORD

UNDERGROUND		ROUGH-IN			FINAL	
Type	Date	By	Type	Date	By	Date
PLUMBING	Sewer Connection		Drainage, W. & Vent			Drainage, W. & Vent
	Building Sewer		Water Piping			Water Heater
	Water Piping		Condensate Lines			Backflow Prevention
			Indirect Waste			
ELECTRICAL	Floor Ducts Raceways		Rough Wiring			FINAL APPROVAL
	Conduits & or Cable		Conduits/Cable			Electric Mtr. Clearance
	Grounding & Bonding		Service Panel			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 #

SP/10/11/84

DATE OF INSPECTION
 FEB 12 1984
 BLDG. DEPT.

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

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 419 E Front Cost of project _____

Owner's Name Don Crampton Address 1462 Ohio

Contractor Owner Telephone No. 599-3782

Address _____

Lot Information: (Not required for siding job)

Lot No. 15 Subdivision Original Plat

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 _____ (Specific Type)

Brief Description of Work: ----- Remove or Demolish
Single Family structure

Size: Length _____ Width _____ No. of Stories _____

Area:	1st Floor _____	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 _____ Applicant's Signature _____

PERMIT NO. 773
PERMIT FEE \$ 10.00

