

PERMIT

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

Permit No. 3447 Issued 01/11/95
date

Job Location 219 Garden
address

Lot _____
sub-div or legal discript

Issued By Brent N. Damman
building official

Owner Alice Tennerly 592-6331
name tel.

Address 219 Garden Napoleon, OH

Agent John McClure
builder-eng.-etc. tel.

Address Rt. #7 V-622 Liberty Center,
OH 43532

Description of Use X

Residential _____
no. dwelling units

Commercial _____ Industrial _____

New X Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 6,500.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	40.00	49.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
<input type="checkbox"/> WATER TAP			
<input type="checkbox"/> SEW. INSP.			
<input type="checkbox"/> SEWER TAP			
<input type="checkbox"/> TEMP. WATER			
<input type="checkbox"/> TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			49.00
LESS MIN. FEES PAID _____ <small>date</small>			49.00
BALANCE DUE.....			-0-

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	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) _____ cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: 16' x 20' garage

PAID

JAN 11 1995

CITY OF NAPOLEON

Date 1-11-95 Applicant Signature John M. McClure
owner-agent

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. 3447 ISSUED 1-11-95

JOB LOCATION 219 Garden

LOT _____
(Subdivision or Legal Description)

ISSUED BY BND
(Building Official)

OWNER Alice Tenny PHONE 592-6331

ADDRESS 219 Garden Nap.

AGENT John McClure PHONE _____

ADDRESS _____

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

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

ESTIMATED COST = \$ 6,500.00

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>40.00</u>	\$ <u>49.00</u>
() Electrical	\$ _____	\$ _____	\$ _____
() Plumbing	\$ _____	\$ _____	\$ _____
() Mechanical	\$ _____	\$ _____	\$ _____
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
() Water Tap	\$ _____	\$ _____	\$ _____
() Sewer Tap	\$ _____	\$ _____	\$ _____
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

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

TOTAL FEES	\$ <u>49.00</u>
Less Fees Paid	\$ <u>49.00</u>
BALANCE DUE	\$ <u>-0</u>

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: Width _____ Length _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet
 Description of Work: 16' x 20' garage

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.

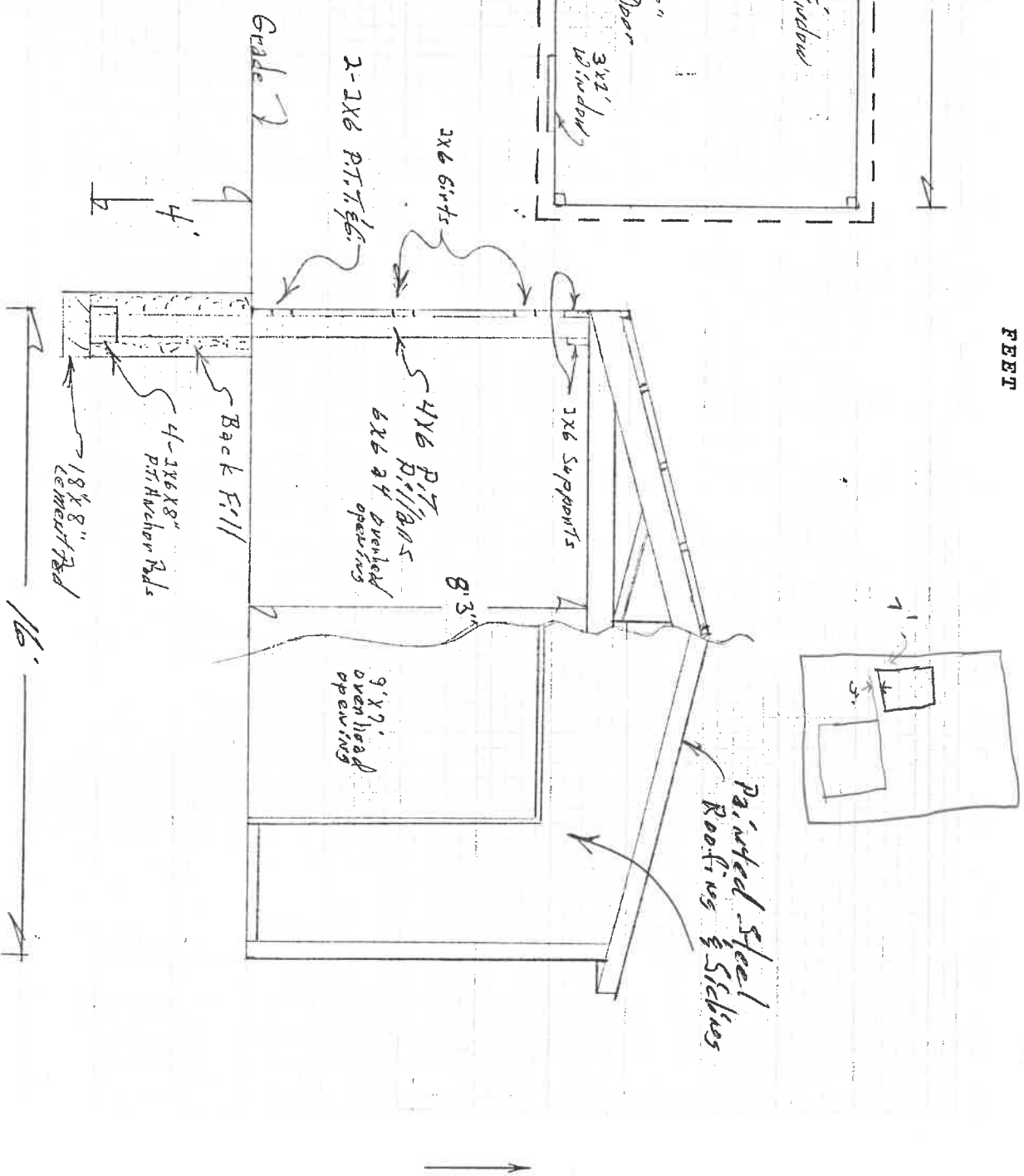
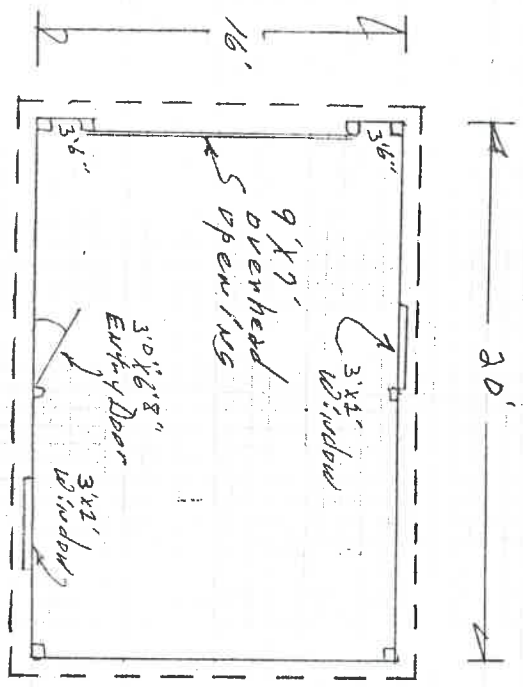
Signature of Applicant _____ Date _____

Bowellco Buildings

Building Layout

Size 16' x 20' x 8'3"
 Roof Loading: TOTAL = _____ psf

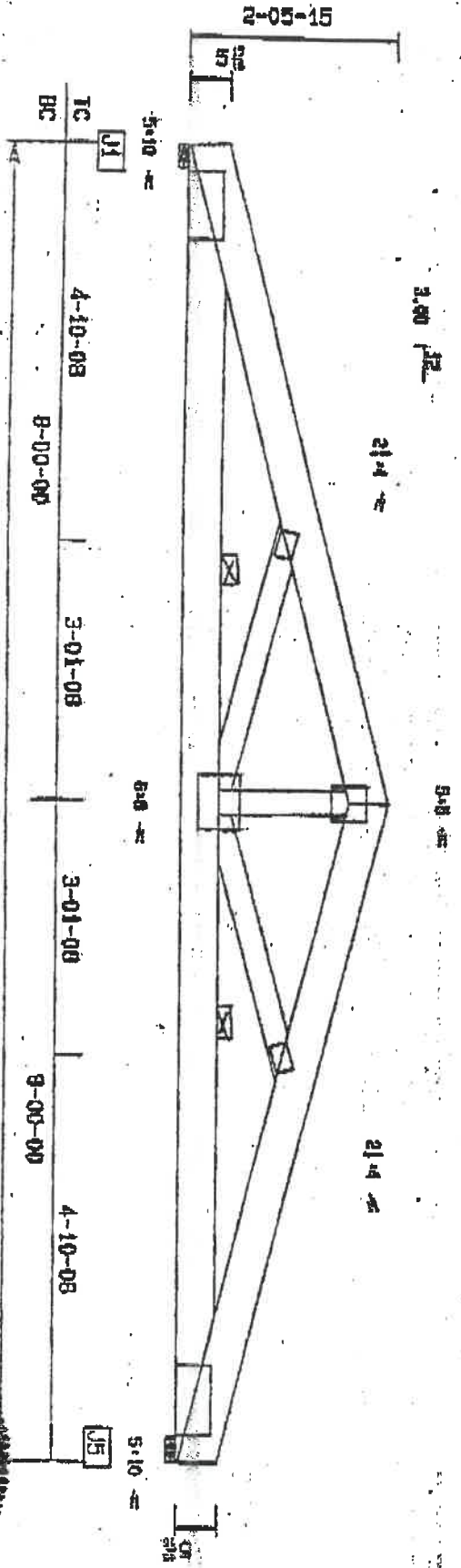
Date 1-12-95
 Customer John McClure / Alice Tenney
 Use Garage
319 Garden St.
Napoleon, Oh.



FEET

FEET

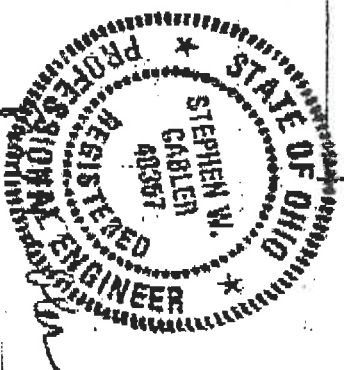
DWG P6/413B
 FILE 500 1/12/95
 1 OF 1 TRS001



TOLL = 20.0 PSF SPACING = 10'-00"-00 REACTIONS MIN 15'-00"-00
 TCDX = 4.0 PSF INCR P=0.98 L=1.15 (L6S) BRG (IN) L/DEF = 16"/0.30" = 52S, CAMB = 0 1/8"
 BCLL = 0.0 PSF BUTT. CUT = 0 1/4" J 1 = -2000 3.5 20 GA. M20 PLATES 258 PSI GNS (MAX)
 BDDL = 1.0 PSF J 5 = -2000 3.5 ** SEE NOTE ON PURLINS **
 PANEL CLIP COMPANY
 NO CLURE
 CONFORMS TO TPI 91 NO REPETITIVE INCR

TOP CHORD - CSR = 0.506
 BOTTOM CHORD - CSR = 0.706
 WEBS - CSR = 0.325
 C 1 = 2X 6 NO 1 SYP
 C 2 = 2X 6 NO 1 SYP
 C 3 = 2X 5 NO 1 SYP
 C 4 = 2X 5 NO 1 SYP
 C 5 = 2X 4 NO 2 SYP
 W 1 = 1610 W 2 = 1249 W 3 = 1610

1. * TOP CHD PURLIN SPCC = 24.0 IN. PURLINS TO BE DESIGNED BY OTHERS.
2. * THERE ARE 4 ROWS OF LATERAL BRACING AT MAX SPACING OF 10FT O.C. FEED ON BOT CHD.
3. THE BOT CHD DEAD LOAD SHOWN IS SUFFICIENT ONLY TO COVER THE TRUSS WEIGHT ITSELF AND DOES NOT ALLOW FOR ANY ADDL LOAD TO BE ADDED TO THE BOT CHD.
4. DEAD LOADS SHOWN INCLUDE WEIGHT OF TRUSS. TOP CHORD DL OF 5 PSF (ON LESS) IS NOT ADEQUATE FOR A SINGLE ROOF. ARCHITECT TO VERIFY ADEQUACY OF TOLL.



JAN 12 1995

