

P E R M I T

CITY OF NAPOLEON  
255 W. RIVERVIEW AVE  
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING  
PH (419) 592-4010  
FAX (419) 599-8393

PERMIT NO: 97114

DATE ISSUED: 04-23-97

ISSUED BY: BND

JOB LOCATION: 115 GLENBROOK CRT

EST. COST: 2780.00

LOT #:

SUBDIVISION NAME:

OWNER: ALDEN, ESTHER  
ADDRESS: 115 GLENBROOK CRT  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-6102

AGENT: VONDEYLEN PLBG & HTG  
ADDRESS: 116 E CLINTON ST  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-592-4756

USE TYPE - RESIDENTIAL: X

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: X ADD'N: ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:  
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION  
FURNACE REPLACEMENT

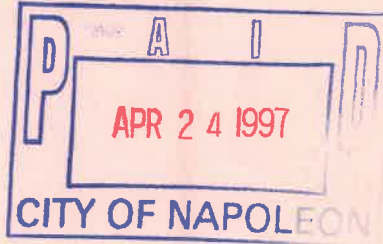
FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

MECHANICAL PERMIT

5.00



TOTAL FEES DUE

5.00

-----  
DATE

-----  
APPLICANT SIGNATURE



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 97114

DATE ISSUED: 04-23-97

JOB LOCATION: 115 GLENBROOK CRT

OWNER: ALDEN, ESTHER

OWNER PHONE: 419-592-6102

CONTRACTOR: VONDEYLEN PLBG & HTG

CONTRACTOR PHONE: 419-592-4756

WORK DESCRIPTION: FURNACE REPLACEMENT

PLUMBING:      UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  SEWER INSP \_\_\_\_\_

MECHANICAL:   UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  FURNACE REPLC 4-24-97 AIR COND \_\_\_\_\_

ELECTRICAL:   UNDGR \_\_\_\_\_      RGHIN \_\_\_\_\_      FINAL \_\_\_\_\_

                  SERV UPGR \_\_\_\_\_

BUILDING:      SITE \_\_\_\_\_      FTG \_\_\_\_\_      FNDDT \_\_\_\_\_

                  STRUC \_\_\_\_\_      ROOF \_\_\_\_\_      EXT \_\_\_\_\_

                  VENT \_\_\_\_\_      ACCES \_\_\_\_\_      EGRS \_\_\_\_\_

                  SMKDT \_\_\_\_\_      FINAL \_\_\_\_\_

                  ISSUE TEMP OCCUP \_\_\_\_\_      ISSUE OCCUP \_\_\_\_\_

STRG SHED:    SITE \_\_\_\_\_      FINAL \_\_\_\_\_

SIGN:          FTG \_\_\_\_\_      FINAL \_\_\_\_\_

FENCE:         SITE \_\_\_\_\_      FINAL \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

INSPECTOR INITIALS: *EMD*

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**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. \_\_\_\_\_ ISSUED \_\_\_\_\_

JOB LOCATION 115 Glenbrook Court

LOT \_\_\_\_\_  
 (Subdivision or Legal Description)

ISSUED BY \_\_\_\_\_  
 (Building Official)

OWNER Esther Alden PHONE 592-6102

ADDRESS 115 Glenbrook Court

AGENT Van Deylen P&H PHONE 592-4756

ADDRESS 116 E Clinton Napoleon OH

USE:  Residential  Commercial  Industrial  
 Other \_\_\_\_\_

WORK:  New  Addition  Replacement  Remodel

|                | <u>Base</u>    | <u>Plus</u> | <u>Total</u>   |
|----------------|----------------|-------------|----------------|
| ( ) Building   | \$ _____       | \$ _____    | \$ _____       |
| ( ) Electrical | \$ _____       | \$ _____    | \$ _____       |
| ( ) Plumbing   | \$ _____       | \$ _____    | \$ _____       |
| ( ) Mechanical | \$ <u>5.00</u> | \$ _____    | \$ <u>5.00</u> |
| ( ) Demolition | \$ _____       | \$ _____    | \$ _____       |
| ( ) Zoning     | \$ _____       | \$ _____    | \$ _____       |
| ( ) Sign       | \$ _____       | \$ _____    | \$ _____       |
| ( ) Water Tap  | \$ _____       | \$ _____    | \$ _____       |
| ( ) Sewer Tap  | \$ _____       | \$ _____    | \$ _____       |
| ( ) Temp Water | \$ _____       | \$ _____    | \$ _____       |
| ( ) Temp Elec. | \$ _____       | \$ _____    | \$ _____       |

ESTIMATED COST = \$ 2780

Additional Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
 Electric \_\_\_\_\_ Hours \_\_\_\_\_

TOTAL FEES . . . . . \$ 5.00  
 Less Fees Paid . . . . . \$ 5.00  
 BALANCE DUE . . . . . \$ \_\_\_\_\_

**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: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: Replace furnace



**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 Randall L. Fisher Date 4-22-97