

PERMIT

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

Permit No. 828 Date May 25, 1984
Job Location 1395 GLENWOOD Valuation \$ _____
Owner ~~OHIO GAS CO.~~ CARL VON DYLAN Address ~~XXXXXXXXXX~~ 1395 GLENWOOD
Contractor OHIO GAS CO. Telephone No. 592 7060
Address 614 N. PERRY, NAPOLEON, OHIO
Electric Contractor MINNICK HEATING 71 OAK DR.
Plumbing Contractor _____
Mechanical Contractor MINNICK HEATING

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 SINGLE Commercial _____ Industrial _____
No. dwelling units
New Construction _____ Addition _____ Remodel X
Brief Description of Work CHANGE HOUSE FROM ALL ELECTRIC TO GAS HEAT AND WHOLE HOUSE A/C

ISSUED BY *Richard J. Haymon* 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 | \$ _____ |
| Electrical Permit | \$ <u>7.00</u> |
| Plumbing Permit | \$ _____ |
| Mechanical Permit | \$ <u>6.00</u> |
| Demolition Permit | \$ _____ |
| Zoning Permit | \$ _____ |
| Sign Permit | \$ _____ |
| Water Tap | \$ _____ |
| Sewer Tap | \$ _____ |
| Temp. Elec. | \$ _____ |
| Other | \$ _____ |

PAID
MAY 25 1984
TOTAL FEES \$ 13.00
LESS FEES PAID \$ _____
BALANCE DUE \$ 13.00

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

PERMIT

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

Permit No. 328 Date May 25, 1984
Job Location 1395 GLENWOOD Address _____ Valuation \$ _____
Owner OHIO GAS CO. CARL VON DYLAN Name _____ Address 1395 GLENWOOD
Contractor OHIO GAS CO. Telephone No. 592 7060
Address 614 N. PERRY, NAPOLEON, OHIO
Electric Contractor MINNICK HEATING 71 80K DR.
Plumbing Contractor _____
Mechanical Contractor MINNICK HEATING

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 SINGLE Commercial _____ Industrial _____
No. dwelling units
New Construction _____ Addition _____ Remodel X
Brief Description of Work CHANGE HOUSE FROM ALL ELECTRIC TO GAS HEAT AND WHOLE HOUSE A/C

ISSUED BY _____ 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
- X _____ Rough-in electrical, plumbing and service framing prior to installing wall board.
- X _____ Final electrical, plumbing and heating.
- _____ Final building inspection, prior to occupancy.

PERMIT & FEES

| | |
|-------------------|-----------------|
| Building Permit | \$ _____ |
| Electrical Permit | \$ <u>7.00</u> |
| Plumbing Permit | \$ _____ |
| Mechanical Permit | \$ <u>6.00</u> |
| Demolition Permit | \$ _____ |
| Zoning Permit | \$ _____ |
| Sign Permit | \$ _____ |
| Water Tap | \$ _____ |
| Sewer Tap | \$ _____ |
| Temp. Elec. | \$ _____ |
| Other | \$ _____ |
| TOTAL FEES | \$ <u>13.00</u> |
| LESS FEES PAID | \$ _____ |
| BALANCE DUE | \$ <u>13.00</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

MAY 25 1984

CITY OF NAPOLEON

INSPECTION RECORD

| UNDERGROUND | | | ROUGH-IN | | | FINAL | | |
|---------------------------|------------------------------|----|---------------------------------|------|----|----------------------------|------|----|
| Type | Date | By | Type | Date | By | Type | Date | By |
| 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 & Cable | | Conduits/Cable | | | Electric Mtr. Clearance | | |
| | Grounding & Bonding | | Service Panel | | | Signs | | |
| | | | Switchboard | | | | | |
| | | | Subpanels | | | | | |
| MECHANICAL | Refrigerant Piping | | Refrigerant Piping | | | FINAL APPROVAL | | |
| | Ducts/Plenums | | Ducts/Plenums | | | Duct Insulation | | |
| | | | Ventilation Supply | | | Chimney(s) | | |
| | | | Exhst. | | | Furnace(s) | | |
| | | | Wall Construction | | | FINAL APPROVAL | | |
| BUILDING | Location, Set-backs, Esmt(s) | | Excavation | | | Fireplace Chimney | | |
| | | | Footings & Reinforcing | | | Attic Vent Access | | |
| | | | Sub-soil Drain | | | Special Insp Reports Rec'd | | |
| | | | Foundation Walls | | | Smoke Detector | | |
| | | | Floor Slab | | | Demolition (sewer cap) | | |
| | | | | | | Building or Structure | | |
| | | | | | | | | |
| FINAL APPROVAL BLDG. DEPT | | — | Certificate of Occupancy Issued | | # | | | |

100 Nov 1-20-16

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR HEATING PERMIT
(PLEASE PRINT OR TYPE)

The undersigned hereby makes application for the installation, replacement or alteration of a heating system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Mechanical Code for 1, 2 and 3 Family Buildings.

Owner's Name CARL VONDELTH Address 1395 GLENWOOD

Contractor's Name OHIO GAS Co Address N. PERKY Tel. 592-8060

BUILDING INFORMATION:

Single Family Double Family _____ Multiple _____ New Construction _____

Addition _____ Remodel _____ Replacement No. of Stories _____

DESCRIPTION OF WORK

Heating System - Warm Air Hot Water _____ Steam _____ Electric _____

Unit Heaters _____ Unit Gas Heaters _____ Other _____

Type - Gravity _____ Forced Radiant _____

No. of Thermostatical Heating Zone 1

Hot Water - One Pipe _____ Two Pipe _____ Series Loop _____

Electric Heat - No. of Circuits _____ Other _____

Total Heat Loss of Area to be Heated 50,000 Btu.

Rated Capacity of Furnace/Boiler 80,000 Btu.

No. of Furnaces 1 No. of Hot Air Runs 9

No. of Hot Water Radiators _____ Type of Fuel _____

Heating Units Located: Crawl Space Floor Level OUTDOORS Suspended _____

Roof or Exposed to Outside Air _____ Attic _____ Other _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: _____

DATE _____ APPLICANT'S SIGNATURE Norm H. [Signature]
OWNER-CONTRACTOR-AGENT

828

600

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

The undersigned hereby makes application for installation or replacement of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Codes.

Owner's Name CARL VONDELTA Address 1395 GLENWOOD

Electrical Contractor MINNICK Htg Telephone No. 592-4561

Address 71 OAK DR. NAPOLEON OHIO

General Contractor OHIO GAS Co Telephone No. 592-2060

Address N. PERKY.

Location of Project _____ Cost of Project _____

Work Information:

Residential 1 Commercial _____ Industrial _____

No. Units

New _____ Service Change _____ Rewiring _____ Additional Wiring

Brief Description of Work: ADD CIRCUIT

Size of proposed service entrance _____ Number of new circuits 2

Type of proposed service entrance _____ Underground _____ Overhead _____

Require Temporary Electric NO (Yes or No)

Total Floor Area - Commercial and Industrial only _____ sq. ft.

Additional Information: _____

*Ground fault circuit interrupter protection is required on all 120-volt single phase, 15 and 20 amp. Circuits which are part of a temporary electric service; and also on bathroom, outdoor, and garage receptacles in all dwelling units. Art. 220-8 N.E.C.

*Application for permit shall be accompanied by two complete sets of plans including: Electrical layout and riser diagram. (For commercial and industrial work only).

Date _____ Applicant's Signature Norm A. Minnick

PERMIT NO. 828
PERMIT FEE \$ 7.00

828

| | |
|--|-----------|
| VIII. ZONING PLAN EXAMINERS NOTES | |
| DISTRICT | |
| USE | |
| FRONT YARD | |
| SIDE YARD | SIDE YARD |
| REAR YARD | |
| NOTES | |
| | |
| | |



