

### City of Napoleon, Ohio

### Zoning Department

255 West Riverview Avenue, P.O. Box 151
Napoleon, OH 43545
Kevin Schultheis Code Enforcement / Zoning Administrator
Telephone: (419) 592-4010 Fax: (419) 599-8393
www.napoleonohio.com

#### **COMMERCIAL ZONING PERMIT**

Issued Date: October 18, 2023

Expiration Date: October 18, 2024

Permit Number: P-23-161

Job Location: 521 Glenwood Avenue

Owner: City of Napoleon, Ohio

255 W. Riverview Avenue Napoleon, OH 43545

Contractor: Gerken Companies Phone: 419-261-1429

Zone: C-4: Planned Commercial

Set Backs: Front Yard- 40' Rear Yard- 10' Side Yard- 10'

Comments: Demo concession/restroom building, all fencing associated with baseball field

Permit Type: Demolition Permit

Fee: \$0.00

Status: Waived

Amount Due: \$0.00

Kevin Schultheis

Code Enforcement/Zoning Administrator

	70.00



# City of Napoleon, Ohio

#### Engineering Department 255 West Riverview Avenue, P.O. Box 151

255 West Riverview Avenue, F.O. Box 151
Napoleon, OH 43545
Chad E. Lulfs, P.E., P.S., Director of Public Works
Telephone: (419) 592-4010 Fax: (419) 599-8393
www.napoleonohio.com

#### **DEMOLITION PERMIT APPLICATION**

ob Address: 52l	GLENWOOD AVE.		
	COMMERCIAL X RES	SIDENTIAL ( ) OTHER ( )	
• WRITTEN	STATEMENT FROM EACH UTI	LITY CONFIRMING THAT ITS SERVICE	
CONNECT	TION HAS BEEN SEALED:		
	WATER (X) SEWER (A)	GAS ( ) ELECTRICAL (XX	
• WRITTEN APPROVE	<u>D:</u>	S REQUIRED BY EPA HAVE BEEN PERFO	ORMED AT
	**		
TOTAL	SQ. FOOTAGE, INCLUDING EAC	SQ. FT PER FLOOR, INCLUDING E	
TOTAL	SQ. FOOTAGE, INCLUDING EAC	MA CH FLOOR AND BASEMENT: ********************************	
TOTAL	SQ. FOOTAGE, INCLUDING EAC	MA CH FLOOR AND BASEMENT:  ***********************************	
TOTAL ************************************	SQ. FOOTAGE, INCLUDING EAC  ***********************************	MA CH FLOOR AND BASEMENT: ********************************	
TOTAL ******** RESIDENTIAL PI COMMERCIAL Z	SQ. FOOTAGE, INCLUDING EAC	CH FLOOR AND BASEMENT:  **************	
TOTAL  *******  RESIDENTIAL PI  COMMERCIAL Z  TOTAL F	SQ. FOOTAGE, INCLUDING EAC	CH FLOOR AND BASEMENT:  ************	
TOTAL  ********  RESIDENTIAL PI  COMMERCIAL Z  TOTAL F  DATE WORK TO  10 - 20 - 2	SQ. FOOTAGE, INCLUDING EACH STATE OF THE PROPERTY OF THE PROPE	CH FLOOR AND BASEMENT:  **************	

\*

#### SECTION 1325.03 (e) DEMOLITION: PERMIT REQUIRED: VACANT LOT

- LOT SHALL BE FILLED, GRADED, AND MAINTAINED IN CONFORMITY TO THE EXISTING LOT GRADE.
- LOT SHALL BE MAINTAINED FREE FROM THE ACCUMULATION OF RUBBISH AND ALL OTHER UNSAFE OR HAZARDOUS CONDITIONS WHICH ENDANGER THE LIFE OR HEALTH OF THE PUBLIC
- PROVISIONS SHALL BE MADE TO PREVENT THE ACCUMULATION OF WATER OR DAMAGE TO ANY FOUNDATIONS ON THE PREMISSES OR THE ADJOINING PROPERTY

OWNER: CITY OF NAPOLEON	CONTRACTOR: GERKEN COMPANIES
ADDRESS: 255 W. RIJERVIEW AVE.	ADDRESS: 9072 Co Ro 424
CSZ: NAPOLEON, OH 43545	CSZ: NAPOLEON OH 43545
PHONE: 419 - 592 - 4010	PHONE: 419-533-7701

THIS APPLICATION IS SUBMITTED FOR A PERMIT TO DEMOLISH A STRUCTURE AS DESCRIBED IN THIS APPLICATION AND ANY DRAWINGS WHICH ACCOMPANY IT. THE ACCEPTANCE OF THE PERMIT SHALL BE CONSIDERED AN AGREEMENT ON THE PART OF THE APPLICANT OR HIS AGENTS TO COMPLY WITH THE BUILDING AND ZONING CODES OF THE CITY OF NAPOLEON, OR OTHER ORDERS, REQUIREMENTS OR SPECIFICATIONS STATED IN THE PERMIT.

2 Cott	TONY COTTER
APPLICANT'S SIGNATURE	PRINTED NAME

DATE

THE PERMIT IS NOT APPROVED UNLESS ALL OF THE ABOVE ITEMS HAVE BEEN SUBMITTED, APPROVED AND ALL-SIGNATURES BELOW HAVE BEEN OBTAINED.

ZONING ADMINISTRATOR

DATE

| 1/2/2-2

CITY ENGINEER DATE



## City of Napoleon, Ohio Zoning Department 255 West Riverview Avenue, P.O. Box 151

Napoleon, OH 43545

Kevin Schultheis Code Enforcement / Interim Zoning Administrator Telephone: (419) 592-4010 Fax: (419) 599-8393 www.napoleonohio.com

Date 10-17-23 Job Location GLENWOOD PARK					
Date 10-17-23 Job Location GLENWOOD PARK					
Owner CITY OF NAPOLEON Telephone # 419-592-4010  Owner Address 255 W. RIVERUIEN AVE NAPOLEON OH 43545					
Contractor GERKEN COMPANIES Cell Phone # 419-241-1429					
Description of Work to be Performed DEMO CONCESSION RESTROOM BUILDING,					
ALL PENCING PROPERTY OF THE ALL ALL	/^				
Estimated Completion Date OCT. 20, 2023 Estimated Cost N/	H				
	WAIVE				
Demo Permit - \$100.00 - See Separate Form (MDEMO	100.1700.46690) \$ 0				
	(00.1700.46690)				
	100.1700.46690) \$				
	100.1700.46690) \$				
	100.1700.46690) \$				
	G 510.0000.47300) \$				
1" Water Tap, 5/8" Meter, Copper Setter and Transmitter - \$1,200.00(Outside City - \$5,680) (MBI	LDG 510.0000.47300) \$				
1" Water Tap, 3/4"Meter, Copper Setter and Transmitter - \$1,300.00(Outside City - \$5,820) (MBL	.DG 510.0000.47300) \$				
1" Water Tap, 1" Meter, Copper Setter and Transmitter - \$1,400.00 (Outside City - \$5,960) (MBI	LDG 510.0000.47300) \$				
1 1/2" Water Tap and Larger - See Operations Superintendent	\$				
	510.0000.44730)				
	5 510.0000.44730)				
	510.0000.44730)				
	\$ 510.0000.44730)				
	5 510.0000.44730)				
	G 510.0000.44730) \$				
	G 510.0000.44730)				
Manufactured Monie Court Court Court	G 510.0000.44730) \$				
	G 510.0000.44730)				
TO	TAL FEE: \$ 0				
I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON ZONING DEPARTMENT. I hereby certify that I am the Owner of the named property, or that the proposed work is authorized by the Owner of record and that I have been authorized by the Owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for Work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.  I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.					
	0-17-23				
SIGNATURE OF APPLICANT: DATE: (CHECK# DATE)					