

PERMIT
CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01809 Issued 8-8-89
date

Job Location 521 Haley
address

Lot 15 Sheffields 1st Addition
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Richard Fisher
name tel.

Address 521 Haley

Agent Bergstedt Builders 592-3451
builder-eng.-etc. tel.

Address 1050 Dodd

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 523.27

ZONING INFORMATION N/A

district	lot dimensions		area	front yd	side yds	rear yd
B						
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd		date appr

WORK INFORMATION:

Size: Length _____ Width N/A Stories _____ Ground Floor Area _____

Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: N/A brief description _____

Plumbing: N/A brief description _____

Mechanical: N/A brief description _____

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: Replace front door

Date _____ Applicant Signature _____
owner-agent

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	9.00	18.00
<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.....			18.00
LESS MIN. FEES PAID _____ <small>date</small>			
BALANCE DUE.....			

PAID

AUG 21 1989

INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
PLUMBING	Building Drains			Drainage, Waste & Vent Piping			Indirect Waste			Drainage, Waste & Vent Piping		
	Water Piping									Backflow Prevention		
	Building Sewer			Water Piping			Condensate Lines			Water Heater		
	Sewer Connection									FINAL APPROVAL		
MECHANICAL	Refrigerant Piping			Refrigerant Piping			Chimney(s)			Grease Exhaust System		
				Duct Furnace(s)			Fire Dampers			Air Cond. Unit(s)		
	Ducts/ Plenums			Ducts/ Plenums			<input type="checkbox"/> Radiant Htr(s) <input type="checkbox"/> Unit Htr(s)			Refrigeration Equipment		
				Duct Insulation			Pool Heater			Furnace(s)		
				Combustion Products Vents			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.			FINAL APPROVAL		
ELECTRICAL	Conduits & or Cable			Conduits/ Cable			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			Temp Service Temp Lighting		
	Grounding & or Bonding			Rough Wiring			<input type="checkbox"/> Generator(s) <input type="checkbox"/> Motors			Fixtures Lampolders		
	Floor Ducts Raceways			Service Panel Switchboard			<input type="checkbox"/> Water Htr <input type="checkbox"/> Welder			Signs		
	Service Conduit			Busways Ducts			<input type="checkbox"/> Heaters <input type="checkbox"/> Heat Cable			Electric Mtr. Clearance		
	Temporary Power Pole			Subpanels			<input type="checkbox"/> Duct Htr(s) <input type="checkbox"/> Furnace(s)			FINAL APPROVAL		
BUILDING	Location, Set-backs, Esmt(s)			Exterior Wall Construction			Roof Covering Roof Drainage			Smoke Detector		
	Excavation						Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls			Columns & Supports			Fireplace Chimney					
	Sub-soil Drain			Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access					
	Piles			Floor System(s)						FINAL APPROVAL BLDG. DEPT.	8/21	5/21
			Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued			
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01809 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. Issued 8-3-89
date

Job Location 521 HALEY
address

Lot 15 SHEFFIELD 1ST ADD.
sub-div or legal descript

Issued By FH
building official

Owner RICHARD FISHER
name tel

Address 521 HALEY

Agent BERGSTEDT BUILDERS 592-3951
builder-eng etc. tel

Address 1050 DODD

Description of Use RESIDENCY

Residential 1
no dwelling units

Commercial Industrial

New Add'n. Alter Remodel X

Mixed Occupancy

Change of Occupancy

Estimated Cost \$ 523.00

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WATER TAP			
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LESS MIN. FEES PAID <u> </u>			
BALANCE DUE.....			

ZONING INFORMATION NA

district	lot dimensions	area	front yd	side yds	rear yd
<u>B</u>					
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WORK INFORMATION: NA

Size: Length Width Stories Ground Floor Area

Height Building Volume (for demo. permit) cu. ft.

Electrical: NA brief description

Plumbing: NA brief description

Mechanical: NA brief description

Sign: NA type Dimensions Sign Area

Additional Information: REPLACE FRONT DOOR

Date Applicant Signature
owner-agent

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

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

Owner's Name Richard Fisher Address 521 Haley
Builder's Name Bergstedt Address 1050 Ordal Tel. 592-3451

LOT INFORMATION: (Not required for roofing or siding job.)

Location of Project 521 Haley Lot # _____
Subdivision _____ Lot Area _____ Sq. Ft. _____
Yard Setback: Front _____ Rear _____ Left Side _____
Right Side _____ Zoning District _____

BUILDING INFORMATION:

Single Double _____ Multiple _____ New Construction _____
Addition _____ Remodel _____ Attached Garage _____
Detached Garage _____ Accessory Building _____ Replacement _____

Brief Description of Work: replace front Door

Size: Length _____ Width _____ No. of Stories _____
Floor Area: 1st Floor _____ Sq. Ft. 2nd Floor _____ Sq. Ft.
3rd Floor _____ Sq. Ft. Easement _____ Sq. Ft.
Unfinished Attic _____ Garage _____
Foundation: Piers _____ Full Basement _____ Part Basement _____
Concrete _____ Thickness _____ Block _____ Size _____
Walls: Frame _____ Block _____ Brick _____ Other _____
Specific Type of Exterior Siding _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITIONS OR REMODELING, SHOW ALL EXISTING STRUCTURE AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: \$ 523.27

DATE Aug 7-1989 APPLICANT'S SIGNATURE Don Bergstedt
OWNER-BUILDER-AGENT

