

PERMIT
CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 01865 Issued 10-25-89
date

Job Location 606 Haley
address

Lot 4 H.C. Groschner's Subdivision
sub-div or legal discript

Issued By Eldon Huber
building official

Owner John Ciercuths
name tel.

Address 606 Haley

Agent Weber Builders 274-5282
builder-eng.-etc. tel.

Address E-970 Co. Rd. 11

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 6600.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	46.00	51.00
<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.....			51.00
LESS MIN. FEES PAID _____			
	<small>date</small>		
BALANCE DUE.....			

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:

N/A

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 _____

Additional Information: Remove roof, new sheathing felt, and reshingle.

New soffitt. New basement wall installed.

PAID

OCT 25 1989

CITY OF NAPOLEON

Date _____ Applicant Signature _____
owner-agent

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 Lampholders		
	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 <i>NOT A</i>		
	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.	<i>11/21/57</i>	<i>F</i>
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					
	<i>RAID</i>						<i>NOT A INFORMED WEIRD 3- SMOKE DETECTOR TO BE INSTALLED AS REQ.</i>					
	<i>OCT 2 1958</i>						<i>11/21/57</i>					
	<i>OFF OF PROTECT</i>											

APPLICATION
for
RESIDENTIAL BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS and DEMOLITION PERMIT
from the

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 419-592-4010

Entry No. _____

Permit No. 01865 Issued 10-25-89

Job Location 606 Hale

Lot 4 H.C. CED SWNERS SUB DIV
sub-div. or legal disc.

Issued By 51

Owner John Ciencotta building official Pn _____

Address 606 Hale

Agent Werner Budas Pn DN-582

Address Ego Co Rd 1

Description of Use Dwellng

Ch. Permits Reg.	Base	Fees Plus	Total
<input checked="" type="checkbox"/> Building	<u>9.00</u>	<u>46.00</u>	<u>51.00</u>
<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"/> Sewer Tap	_____	_____	_____
<input type="checkbox"/> Temp. Water	_____	_____	_____
<input type="checkbox"/> Temp. Elec.	_____	_____	_____
Additional plan review	struc. _____ hrs	Elect. _____ hrs	_____

Residential 1 no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 66000.00

Total Fees..... 51.00
Less Min. Fees Pd. _____
date _____
Balance Due..... _____

-ZONING INFORMATION NA

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

WORK INFORMATION: NA
BUILDING: Garage Fl. Area _____ Basement Fl. Area _____ Second Floor Area _____
Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

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

Description of Work: Remove roof New sheathing felt and mesh wale. New soffitt. New Basement wall installed.

PAID
OCT 25 1989

ELECTRICAL: Electrical Contractor _____ Pn. _____
Address _____ Estimated Cost \$ _____
Type of work: New _____ Service change _____ Rewiring _____ Additional Wiring _____ Temp. Elec. Req. _____
Size of service _____ Underground _____ Overhead _____ No. of new circuits _____
Description of work: _____

PLUMBING: Plumbing Contractor _____ Pn. _____
Address _____ Estimated Cost \$ _____
Water Tap Req. _____ Size _____ Type of Pipe _____ Water Dist. Pipe _____
yes no type
San. Sewer Tap Req. _____ Size _____ Type of Pipe _____ Dr.Waste Vt.Pipe _____
yes no type
St. Sewer Tap Req. _____ Size _____ Type of Pipe _____ Street to be Opened _____
yes no yes no
Main Building Drain Size _____ Main Vent Pipe Size _____ List Number of Plumbing Fixtures Below
Water Closets _____ Bathtubs _____ Showers _____ Lavatories _____ Kitchen Sinks _____ Disposal _____ Dishwasher _____ Clothes Washer _____
Floor Drains _____ Other Fixtures: Type _____ No. _____
Description of Work: _____

MECHANICAL: Mechanical Contractor _____ Pn. _____
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 _____
No. of Heat.Zones _____ Hot Water:(One Pipe _____ Two Pipe _____ Series Loop _____) Electric Heat:(No of Circuits _____) No. of Furnaces _____
No. of Hot Air Runs _____ No. of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____
Location of Heating Units: Crawl Space _____ Floor Level _____ Attic _____ Suspended _____ Roof _____ Outside _____ Other _____
Description of Work _____

DRAWINGS REQUIRED: All Applications must be Accompanied by Two Complete sets of Drawings Including SITE PLAN, FOUNDATION PLAN, FLOOR PLANS, STRUCTURAL FRAMING PLANS, EXTERIOR ELEVATIONS, SECTIONS and DETAILS, STAIR DETAILS, ELECTRICAL LAYOUT, PLUMBING ISOMETRIC, HEATING LAYOUT ETC. All plans shall be DRAWN TO SCALE. Show all existing structures on the site plan also, 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.D. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Dept. Rules and Regulations, Standard Specifications and other Pertinent Sections of the Napoleon Code of Ordinances.

Date 10/25/89 Signature of Applicant *Fred [Signature]*
Application not valid without signature

STAMP