

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

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Ave. Napoleon, Ohio 43345 Ph. 419-592-4010

Entry No. _____

Permit No. 02301 Issued 5-23-91

Job Location 942 Haley

Lot PT. Section 14 + 13
sub-div. or legal disc.

Issued By BND
building official

Owner Rick Riebasel Pn 592-1226

Address 942 Haley

Agent Self Pn _____

Address _____

Description of Use _____

Residential _____

Commercial _____ no. dwelling units _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 500.00

-ZONING INFORMATION

district	lot dimensions	area	front yd	side yds.	rear yd
<u>C</u>	<u>Irregular</u>		<u>25</u>	<u>5</u>	<u>15</u>
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd.	date appr
<u>35</u>	<u>2 per</u>		<u>45%</u>		

WORK INFORMATION:

BUILDING: Garage Fl. Area _____ Basement Fl. Area _____ Second Floor Area _____

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

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

Description of Work: _____

Ch. Permits Req.	Base	Fees Plus	Total
Building	_____	_____	_____
<input checked="" type="checkbox"/> Electrical	<u>15.00</u>	_____	<u>15.00</u>
Plumbing	_____	_____	_____
Mechanical	_____	_____	_____
Demolition	_____	_____	_____
Zoning	_____	_____	_____
Sign	_____	_____	_____
Water tap	_____	_____	_____
Sewer Tap	_____	_____	_____
Temp. Water	_____	_____	_____
Temp. Elec.	_____	_____	_____
Additional plan review	struc. _____ hrs	Elect. _____ hrs	_____
Total Fees.....	_____	_____	<u>15.00</u>
Less Min. Fees Pd. <u>5-23-91</u> date	_____	_____	<u>15.00</u>
Balance Due.....	_____	_____	<u>-0-</u>

PAID

MAY 23 1991

CITY OF NAPOLEON

Continue on Back Side for Electrical, Plumbing and Mechanical and other Information;

ELECTRICAL: Electrical Contractor Self Pn. _____

Address _____ Estimated Cost \$ 500.00

Type of work: New _____ Service change Rewiring _____ Additional Wiring _____ Temp. Elec. Req. _____
yes no

Size of service 200 Underground _____ Overhead No. of new circuits _____

Description of work: Electrical Service Upgrade

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.O. 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 _____ Signature of Applicant _____

Application not valid without signature

METER SOCKET RELEASE

issued by

The Napoleon Electric Distribution Department

639 Industrial Drive Napoleon, Ohio 43545 Pn. 592-9116 or 592-4010

Entry No. _____

Permit No. 0077-90 Issued 5-23-91 Building permit No. 02301 Job Address 942 Haley

Lot Number _____ Sub Division Pt Sec. 1A

Owner Rick Riebesel Owners Address 942 Haley Pn. No. 592-1226

Contractor Self Contractors Address _____ Pn. No. _____

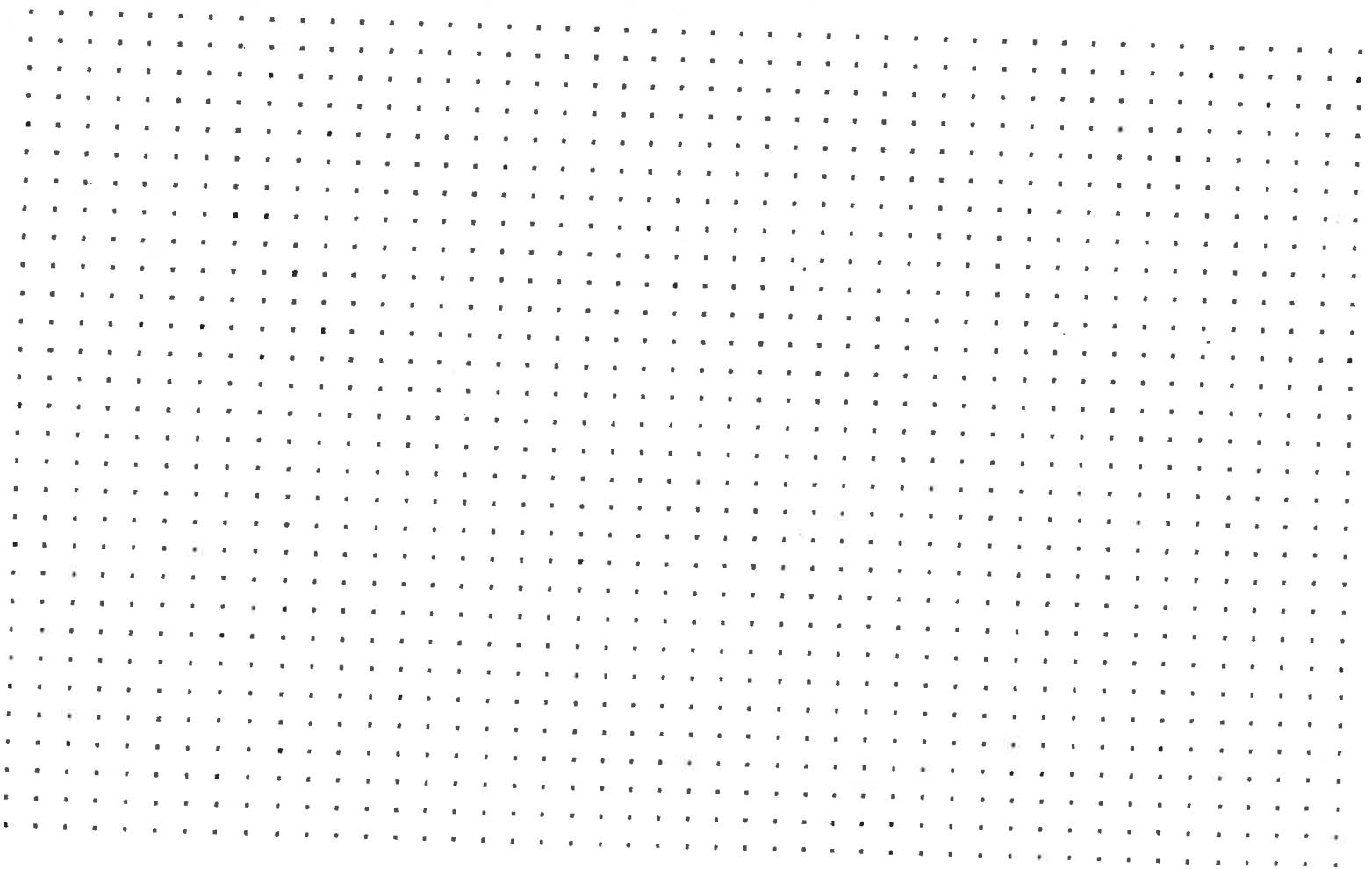
Size of Service 200 Overhead Underground _____ Issued By Quint Nammann

Date completed _____ Approved by _____

Size of Service _____ Overhead _____ Underground _____ Street and No. _____ electric distribution dept.

Old Meter No. _____ New Meter No. _____ Remarks _____

Sketch of Service



PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 02301 Issued 5-23-91 date

Job Location 942 Haley address

Lot Pt. Section 14 & 13 sub-div or legal discript

Issued By Brent N. Damman building official

Owner Rick Riebesel 592-1226 name tel.

Address 942 Haley

Agent Self builder-eng.-etc. tel.

Address _____

Description of Use _____

Residential _____ no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$500.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input checked="" type="checkbox"/> ELECTRICAL	\$15.00		\$15.00
<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			
SEW. INSP.			
SEWER TAP			
TEMP. WATER			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			\$15.00
LESS MIN. FEES PAID <u>5-23-91</u> date			15.00
BALANCE DUE.....			\$ 0.00

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
C	irregular		25'	5'	15'
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
35'	2 per		45%		

WORK INFORMATION:

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

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

Electrical: Electrical Service Upgrade brief description

Plumbing: _____ brief description

Mechanical: _____ brief description

Sign: _____ Dimensions _____ Sign Area _____ type

Additional Information: _____ **PAID**

Date 5-24-91 Applicant Signature *Rick Riebesel* MAY 23 1991

CITY OF NAPOLEON

