

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT
 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01341 Issued 4-9-87
date

Job Location 1050 Highland
address

Lot 29 Highlands 2nd add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Howard J. Mitchell
name tel.

Address 1035 Highland

Agent Howard J. Mitchell 592-1217
builder-eng.-etc. tel.

Address 1035 Highland

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 5,000.00

FEE	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	24.75	31.75
<input checked="" type="checkbox"/> ELECTRICAL	10.00	8.00	18.00
<input checked="" type="checkbox"/> PLUMBING	6.00	2.00	8.00
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			57.75
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION N.A.

district <u>A</u>	lot dimensions	area	front yd	side yds	rear yd
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: New 150 amp service & 4 circuits
brief description

Plumbing: Install new kitchen sink.
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: Replace north foundation wall and 12' of the west foundation wall, 1 window, install paneling and cabinets provide smoke detectors.

Date 4-10-87 Applicant Signature Howard Mitchell **PAID** APR 8 1987
owner-agent

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01341 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. [REDACTED] Issued 4-7-87 date

Job Location 1050 HIGHLAND address

Lot 29 HIGHLAND 2ND ADD sub-div or legal discript

Issued By F building official

Owner HOWARD J. MITCHELL name tel.

Address 1035 HIGHLAND

Agent HOWARD J. MITCHELL 592-1217 builder-eng.-etc. tel.

Address 1035

Description of Use RESIDENCE

Residential 1 no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 5000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	6.00	24.75	31.75
<input checked="" type="checkbox"/> ELECTRICAL	10.00	8.00	18.00
<input checked="" type="checkbox"/> PLUMBING	6.00	2.00	8.00
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			57
LESS MIN. FEES PAID _____ date			24.75
BALANCE DUE.....			

ZONING INFORMATION N/A

district <u>A</u>	lot dimensions	area	front yd	side yds	rear yd
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: NEW 150 AMP SERVICE + 9 CIRCUITS
brief description

Plumbing: INSTALL NEW KITCHEN SINK
brief description

Mechanical: _____
brief description

Sign: _____
type Dimensions Sign Area

Additional Information: REPLACE NORTH FOUNDATION WALL AND 12'-0" OF THE WEST FOUNDATION WALL 1-WINDOW, INSTALL PANELING AND CABINETS PROVIDE SMOKE DETECTORS

Date _____ Applicant Signature _____ owner-agent

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

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

Location of project 1050 Highland Cost of project 5000.00
 Owner's Name Howard J Mitchell Address 1035 Highland
 Contractor Howard J Mitchell Telephone No. 592-1217
 Address 1035 Highland Napoleon, Ohio

Lot Information: (Not required for siding job)

Lot No. 29 Subdivision Highland
 Zoning District A Lot Size _____ ft. X _____ ft. Area _____ sq. ft.
 Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential Commercial _____ Industrial _____
 New Construction _____ Addition _____ Remodel
 Accessory Building _____ Siding _____

Brief Description of Work: ----- Paneling, cabinets replace (Specific Type)
1 window REPLACE NORTH FOUND. WALL X 12' OF THE
WEST FOUNDATION WALL.
 Size: Length _____ Width _____ No. of Stories _____

Area:	1st Floor _____	sq. ft.	Basement _____	sq. ft.
	2nd Floor _____	sq. ft.	Accessory Bldg. _____	sq. ft.
	3rd Floor _____	sq. ft.	Other _____	sq. ft.

Additional Information: _____

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

Date 4-6-87 Applicant's Signature Howard Mitchell

PERMIT NO.

PERMIT FEE \$

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 Howard Mitchell Address 1035 Highland

Electrical Contractor Howard Mitchell Telephone No. 5921217

Address _____

General Contractor _____ Telephone No. _____

Address _____

Location of Project 1050 Highland Cost of Project \$1000.00

Work Information:

Residential 1 Commercial _____ Industrial _____
No. Units

New _____ Service Change X Rewiring _____ Additional Wiring X

Brief Description of Work: Old house

Size of proposed service entrance 150 Number of new circuits 4

Type of proposed service entrance _____ Underground _____ Overhead X

Require Temporary Electric no (Yes or No)

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

Additional Information: _____

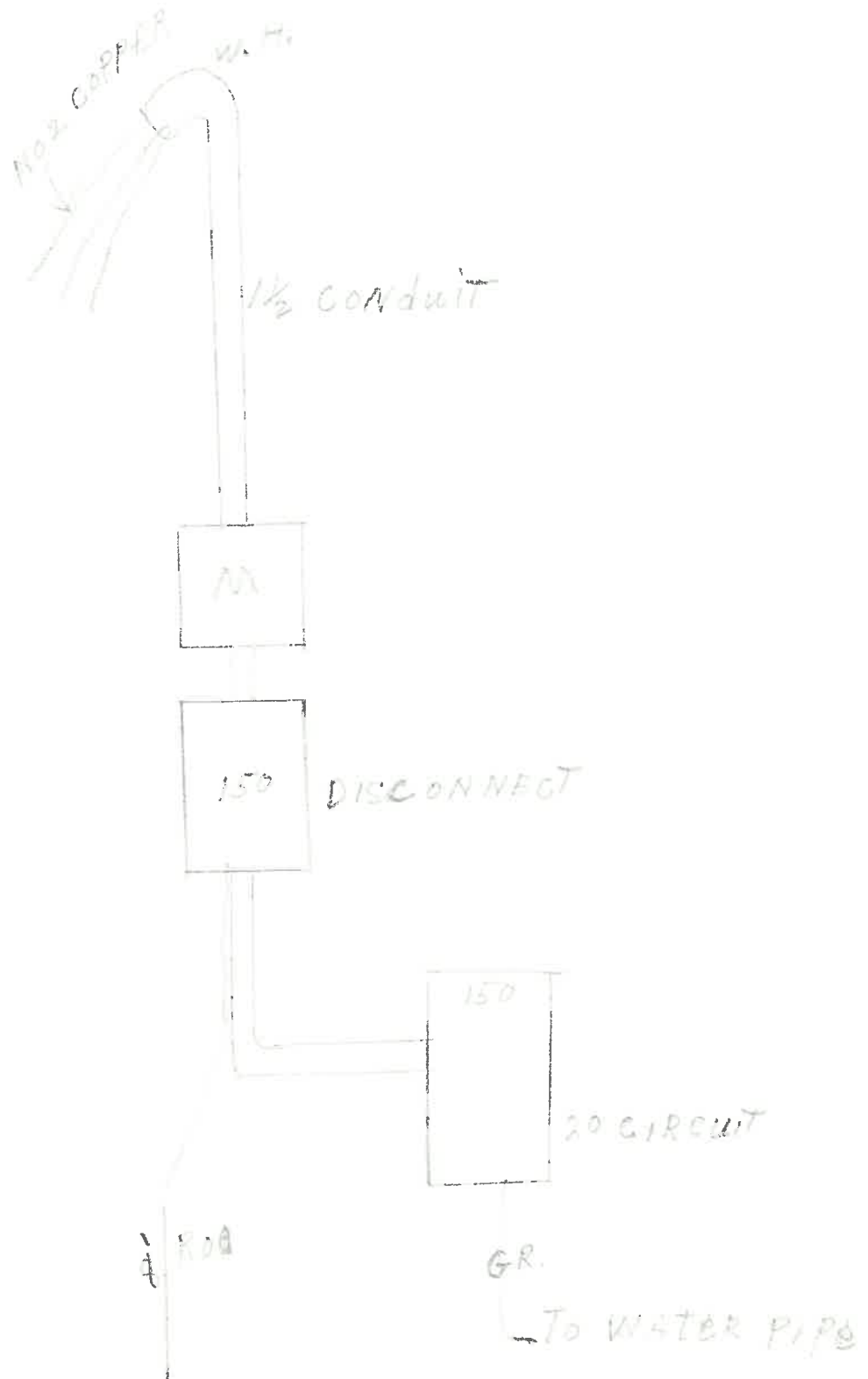
PERMIT NO.

PERMIT FEE \$

*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).

ate 4-6-87 Applicant's Signature Howard Mitchell



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

The undersigned hereby makes application for the installation or replacement of plumbing work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Codes. (1, 2 and 3 family dwelling units only).

Owner's Name _____ Address _____

Plumbing Contractor _____ Telephone No. _____
 Address _____

General Contractor _____ Telephone No. _____
 Address _____

Location of Project 1075 HIGHLAND Cost of Project _____

Work Information:

No. of dwelling units _____ New _____ Replacement _____ Addition _____

Brief description of work: _____

Is water tap required _____ Size _____ Type of Pipe _____

Is sewer tap required _____ Size _____ Type of Pipe _____

Type of Water Distribution pipe _____

Type of Drainage, Waste and Vent Pipe _____

Size of main building drain _____ Size of main vent pipe _____

Water closets _____ Bathtubs _____ Shower _____
 No. Trap Size No. Trap Size

Bathrooms _____ Kitchen Sink 1 1/2" Disposal _____
 No. Trap Size No. Trap Size No. Trap Size

Dishwasher _____ Clothes Washer _____ Other _____
 No. Trap Size No. Trap Size No. Trap Size

PERMIT NO. _____
 PERMIT FEE \$ _____

All installations are subject to plumbing tests and/or inspections.

Date _____ Applicant's Signature _____

