

**PERMIT**

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

Permit No. 01299 Issued 1-9-87 date  
 Job Location 844 Hobson address  
 Lot 178 Phillips & Stafford's 4th add. sub-div or legal discript  
 Issued By Eldon Huber building official  
 Owner Jan Gilliland name tel.  
 Address 844 Hobson  
 Agent Self 592-7713 builder-eng.-etc. tel.  
 Address 844 Hobson  
 Description of Use Residence

Residential 1 no. dwelling units  
 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
 New \_\_\_\_\_ Add'n. X Alter \_\_\_\_\_ Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 700.00

**ZONING INFORMATION** N.A.

	FEE	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING				
<input type="checkbox"/> ELECTRICAL				
<input checked="" type="checkbox"/> PLUMBING	3.00		3.00	6.00
<input checked="" type="checkbox"/> MECHANICAL	6.00			6.00
<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.....				12.00
LESS MIN. FEES PAID _____ date				
BALANCE DUE.....				

district	lot dimensions		area	front yd	side yds	rear yd
<u>C</u>						
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: Refer to permit no. 01289  
 Plumbing: 1 - bathroom brief description  
 Mechanical: 6 - hot air runs from existing furnace. brief description

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
 type

Additional Information: Refer to permit no. 01279 (addition to 2nd story). **PAID**

Date 1-8-87 Applicant Signature Sandra Gilliland owner-agent **JAN 09 1987**

**CITY OF NAPOLEON**



# PERMIT

## CITY OF NAPOLEON - BUILDING DEPARTMENT

01299 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. [REDACTED] Issued 1-8-87 date

Job Location 844 HOBSON address

Lot 178 PHILLIPS + STAFFORD'S 9<sup>TH</sup> sub-div or legal discript

Issued By EA building official

Owner JAN BILLLIARD name tel.

Address 844 HOBSON

Agent SELF 592-7713 builder-eng.-etc. tel.

Address 844 HOBSON

Description of Use RESIDENCE

Residential 1 no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. X Alter \_\_\_\_\_ Remodel \_\_\_\_\_

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 700.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input type="checkbox"/> ELECTRICAL			
<input checked="" type="checkbox"/> PLUMBING	3.00	3.00	6.00
<input checked="" type="checkbox"/> MECHANICAL	6.00		6.00
<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.....			12.00
LESS MIN. FEES PAID _____ date			
BALANCE DUE.....			

### ZONING INFORMATION N.A.

district <u>C</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: REFER TO PERMIT NO 01289 brief description

Plumbing: 1-BATHROOM brief description

Mechanical: 6-HOT AIR RONS FROM EXISTING FURNACE brief description

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_

Additional Information: REFER TO PERMIT NO 01279 (ADDITION TO 2ND STORY)

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_ owner-agent





# PERMIT

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

1289

Permit No. [REDACTED] Issued 12-11-86  
date

Job Location 844 HOBSON ST.  
address

Lot 178 PHILIPS & STAFFORD'S 4TH ADD  
sub-div or legal discript

Issued By 51  
building official

Owner JAN GILLILAND  
name tel.

Address 844 HOBSON ST.

Agent MIKES ELECTRIC  
builder-eng.-etc. tel.

Address 104B E. RIVERVIEW

Description of Use RESIDENCE

Residential 1  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel X

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 200.00

FEES	BASE	PLUS	TOTAL
BUILDING			
ELECTRICAL	5.00	2.00	7.00
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			
LESS MIN. FEES PAID _____ <small>date</small>			7.00
BALANCE DUE.....			

**ZONING INFORMATION** N.A.

district <u>C</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 28 Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

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

Electrical: 2-NEW CIRCUITS  
brief description

Plumbing: N.A.  
brief description

Mechanical: N.A.  
brief description

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
type

Additional Information: REFER TO PERMIT NO 01279

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_  
owner-agent



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 JAN & SANDY GILLILAND Address 844 HOBSON ST

Electrical Contractor MIKE'S ELECTRIC Telephone No. 592-8356  
Address 1048 E RIVERVIEW

General Contractor ROGER CARTER Telephone No. N/A  
Address \_\_\_\_\_

Location of Project SAME Cost of Project \$ 200

Work Information:

Residential 1 Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
No. Units  
New \_\_\_\_\_ Service Change \_\_\_\_\_ Rewiring \_\_\_\_\_ Additional Wiring X

Brief Description of Work: 2 UPSTAIRS BDRM. @ 5-0

Size of proposed service entrance \_\_\_\_\_ Number of new circuits 2

Type of proposed service entrance \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_

Require Temporary Electric NO (Yes or No)

Total Floor Area - Commercial and Industrial only \_\_\_\_\_ sq. ft.

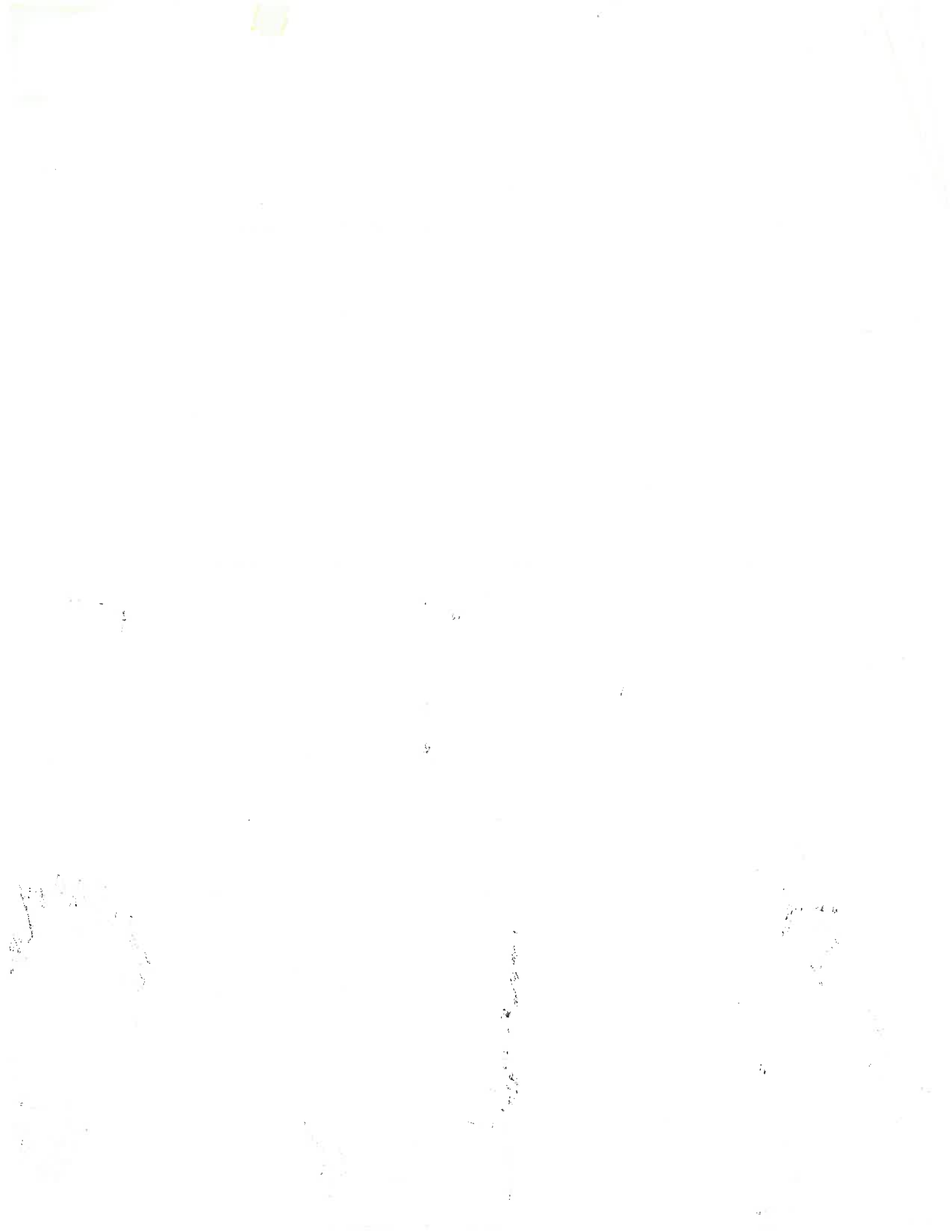
Additional Information: \_\_\_\_\_

\*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. 210-8 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).

Date 12-10-86 Applicant's Signature [Signature]

PERMIT NO. \_\_\_\_\_  
PERMIT FEE \$ \_\_\_\_\_



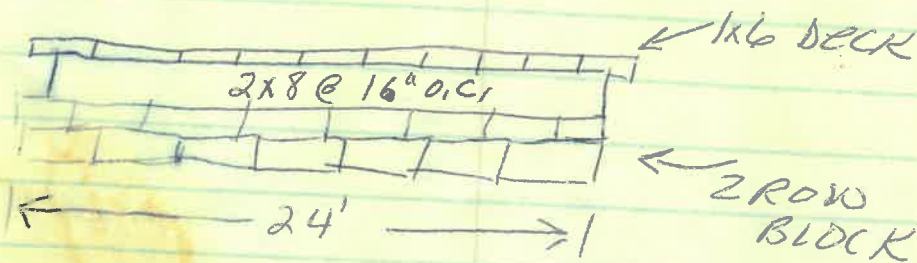


REPAIR 5' x 24' FRONT  
PORCH.

LAY 2 ROWS OF  
8' BLOCK. NEW WOOD PORCH  
DECK.

WILBERT BOSTLEMAN WILL  
LAY BLOCK.

JAN GILLIAND WILL BUILD  
DECK.



Handwritten notes on lined paper, possibly bleed-through from the reverse side. The text is mostly illegible due to fading and bleed-through. A vertical yellow line is drawn down the page. Some legible fragments include:

- Top right: "10/10/10"
- Middle right: "8 1000"
- Bottom right: "Deck"
- Bottom right: "T"

# PERMIT

## CITY OF NAPOLEON - BUILDING DEPARTMENT

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

01279

Permit No. [REDACTED] Issued \_\_\_\_\_ date \_\_\_\_\_

Job Location 844 HOBSON ST. NA address \_\_\_\_\_

Lot 78 PHILLIPS STANFORD 4TH ADD. sub-div or legal discript \_\_\_\_\_

Issued By FH building official \_\_\_\_\_

Owner JAN GILLILAND name \_\_\_\_\_ tel. \_\_\_\_\_

Address 844 HOBSON ST. \_\_\_\_\_

Agent ROGER CARTER BUILDERS builder-eng.-etc. \_\_\_\_\_ tel. 875-6552

Address RR 2 BOX 267 LIBERTY CROFTD \_\_\_\_\_ tel. OHIO 43532

Description of Use RESIDENCE \_\_\_\_\_

Residential 1 no. dwelling units \_\_\_\_\_

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New X Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel \_\_\_\_\_

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 25,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	3.00	43.50	46.50
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<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.....			46.50
LESS MIN. FEES PAID _____ date _____			
BALANCE DUE.....			

### ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
C	6				
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
<del>35'</del>	2-MIN.		45%		

### WORK INFORMATION:

Size: Length 38'-6" Width 39'-8" Stories 2 SECOND FLOOR ADDITION 741 SQ. FT.

Height 24'-0" Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Ground Floor Area 1125 EXISTING

Electrical: APPLY FOR SEPERATELY brief description \_\_\_\_\_

Plumbing: N.A. brief description \_\_\_\_\_

Mechanical: APPLY FOR SEPERATELY brief description \_\_\_\_\_

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_

Additional Information: ADDITION TO THE 2<sup>ND</sup> STORY OF AN EXISTING RESIDENCE

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 844 Hobson - Napoleon Cost of project \$25,000.<sup>00</sup>

Owner's Name JAN GILLILAND Address 844 Hobson St. Napoleon

Contractor ROGER CARTER BUILDERS Telephone No. 875-6552

Address RR 2 Box 267 Liberty Center, Ohio 43532

Lot Information: (Not required for siding job)

Lot No. 79 178 Subdivision PHILLIPS & STANFORD 4TH ADD

Zoning District C Lot Size 66' ft. X 165' ft. Area \_\_\_\_\_ sq. ft.

Setbacks: Front 28'-6" Right Side 10'-0" Left Side 17'-4' Rear \_\_\_\_\_

Work Information:

Residential  Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New Construction \_\_\_\_\_ Addition 2<sup>ND</sup> STORY Remodel \_\_\_\_\_

Accessory Building \_\_\_\_\_ Siding Mastic - D-4 Vinyl

(Specific Type)

Brief Description of Work: ----- Add second story to existing house

over living room and kitchen area, to be used as bed room space

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: Contractor to do rough framing, Siding, Roofing

get windows - Owner to be responsible for interior work.

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 Nov 7<sup>th</sup> Applicant's Signature Roger M Carter

DRAW PLOT PLAN REVERS SIDE

PERMIT NO. \_\_\_\_\_  
PERMIT FEE \$ 46.50





RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON  
255 West Riverview Ave.  
Napoleon, Ohio 43545  
419/592-4010

ADDENDUM TO Permit No. 01299  
Owner JAN GILLILIANO  
Contractor SELF  
Location 899 HOLTMAN

Please note the items checked below and incorporate them into your plans as indicated:  PERMIT NOT YET ISSUED, CORRECT PLANS AND RE-SUBMIT.  PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL		
Provide approved smoke detector(s) as req'd.	Show size of members supporting porch roof.	
Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.	Provide double top plate for all bearing partitions and exterior walls.	
Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)	Provide design data for prefab wood truss.	
Submit fully dimensioned plot plan.	Ceiling joists undersized in _____	
Provide min. of 1-3'0" x 6'8" exit door.	Roof rafters undersized in _____	
Provide min. 22" x 30" attic access opening.	PLUMBING AND MECHANICAL	
Provide min. 18" x 24" crawl space access opening.	<input checked="" type="checkbox"/> Terminate all exhaust systems to outside air.	
Provide approved sheathing or flashing behind masonry veneer.	<input checked="" type="checkbox"/> Insulate ducts in unheated areas.	
Provide min. 15# underlayment on roof.	<input checked="" type="checkbox"/> Provide backflow prevention device on all hose bibs.	
Provide adequate fireplace hearth.	<input checked="" type="checkbox"/> Terminate pressure and temperature relief valve drain in an approved manner.	
Install factory built fireplaces/stoves according to manufacturers instructions.	Provide dishwasher drain with approved air gap device.	
Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.	METAL VENEERS	
LIGHT AND VENTILATION		
Provide mechanical exhaust or window in bathroom	Contact City Utilities Dept. to remove conductors and/or meter.	
Provide min. _____ Sq. In. net free area attic ventilation.	Provide approved system of grounding and bonding.	
Provide min. _____ Sq. In. net free area crawl space ventilation.	ELECTRICAL	
FOUNDATION		
Min. depth of foundation below finished grade is 32".	Show location of service entrance panel and service equipment panel.	
Min. size of footer _____" x _____".	G. F. C. I. req'd. on temporary electric.	
Provide anchor bolts, 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.	Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.	
Show size of basement columns.	Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.	
FRAMING		
Show size of wood girder in _____.	Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.	
Provide design data for structural member in _____.	INSPECTIONS	
Floor joists undersized in _____.	The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.	
Provide double joists under parallel bearing partitions.	Footers and Setbacks.	Building sewer.
Provide 1" x 4" let in corner bracing, approved sheathing, or equal.	Foundation.	<input checked="" type="checkbox"/> HVAC rough-in.
Show size of headers for openings over 4' wide _____.	<input checked="" type="checkbox"/> Plumbing rough-in.	Final Building other,
	<input checked="" type="checkbox"/> Plumbing final.	
	Electrical service.	
	Electrical rough-in.	
	Electrical final	

Additional Corrections. PROVIDE EITHER AN EXHAUST FAN OR A WINDOW IN THE NEW TOILET

The approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No. 01299 and made a part thereof. DATE APPROVED OR DISAPPROVED 1-8-87 Checked by EH

DATE RECHECKED AND APPROVED \_\_\_\_\_

Checked by \_\_\_\_\_

Plan Examiner.



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

3.00  
 3.00  
 6.00

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 JAN GILLILAND Address 844 HOBSON  
 Plumbing Contractor SAME Telephone No. 592-7713  
 Address \_\_\_\_\_  
 General Contractor ROGER CARTER Telephone No. 875-6552  
 Address LIBERTY CENTER  
 Location of Project 844 HOBSON Cost of Project \$500.00

Work Information:

No. of dwelling units 1 New \_\_\_\_\_ Replacement \_\_\_\_\_ Addition X  
 Brief description of work: ADD 2ND FLOOR SHOWER,  
LAV, & WATER CLOSET, EXTEND VENT  
 Hot water tap required NO Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_  
 Cold water tap required NO Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_  
 Type of Water Distribution pipe COPPER  
 Type of Drainage, Waste and Vent Pipe PVC  
 Size of main building drain 4" Size of main vent pipe 3"  
 Water closets 2 Bathtubs 1 Shower 1  
 No. Trap Size No. Trap Size No. Trap Size  
2 1 1/2" 1 2" 1 2"  
 No. Trap Size No. Trap Size No. Trap Size  
 Lavatories 2 Kitchen Sink 1 Disposal NO  
 No. Trap Size No. Trap Size No. Trap Size  
2 1 1/2" 1 1 1/2" NO  
 No. Trap Size No. Trap Size No. Trap Size  
 Dishwasher NO Clothes Washer 1 Other \_\_\_\_\_  
 No. Trap Size No. Trap Size No. Trap Size  
NO 1 1 1/4" \_\_\_\_\_  
 No. Trap Size No. Trap Size No. Trap Size

PERMIT NO. 01299  
 PERMIT FEE \$ 6.00

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

Date 1-7-87 Applicant's Signature Jan Gilliland





HEATING 6.00

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

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

Owner's Name JAN GILLILAND Address 844 HOBSON

Contractor's Name SAME Address \_\_\_\_\_ Tel. 592-7713

BUILDING INFORMATION:

Single Family  Double Family \_\_\_\_\_ Multiple \_\_\_\_\_ New Construction \_\_\_\_\_  
Addition  Remodel \_\_\_\_\_ Replacement \_\_\_\_\_ No. of Stories \_\_\_\_\_

DESCRIPTION OF WORK

Heating System - Warm Air  Hot Water \_\_\_\_\_ Steam \_\_\_\_\_ Electric \_\_\_\_\_

Unit Heaters \_\_\_\_\_ Unit Gas Heaters \_\_\_\_\_ Other \_\_\_\_\_

Type - Gravity \_\_\_\_\_ Forced  Radiant \_\_\_\_\_

No. of Thermostatical Heating Zone 1

Hot Water - One Pipe \_\_\_\_\_ Two Pipe \_\_\_\_\_ Series Loop \_\_\_\_\_

Electric Heat - No. of Circuits \_\_\_\_\_ Other \_\_\_\_\_

Total Heat Loss of Area to be Heated \_\_\_\_\_ Btu.

Rated Capacity of Furnace/Boiler 90,000 Btu.

No. of Furnaces 1 No. of Hot Air Runs EXISTING, 3 ADDED

No. of Hot Water Radiators \_\_\_\_\_ Type of Fuel NAT. GAS.

Heating Units Located: Crawl Space \_\_\_\_\_ Floor Level \_\_\_\_\_ Suspended \_\_\_\_\_

Roof or Exposed to Outside Air \_\_\_\_\_ Attic \_\_\_\_\_ Other BASEMENT

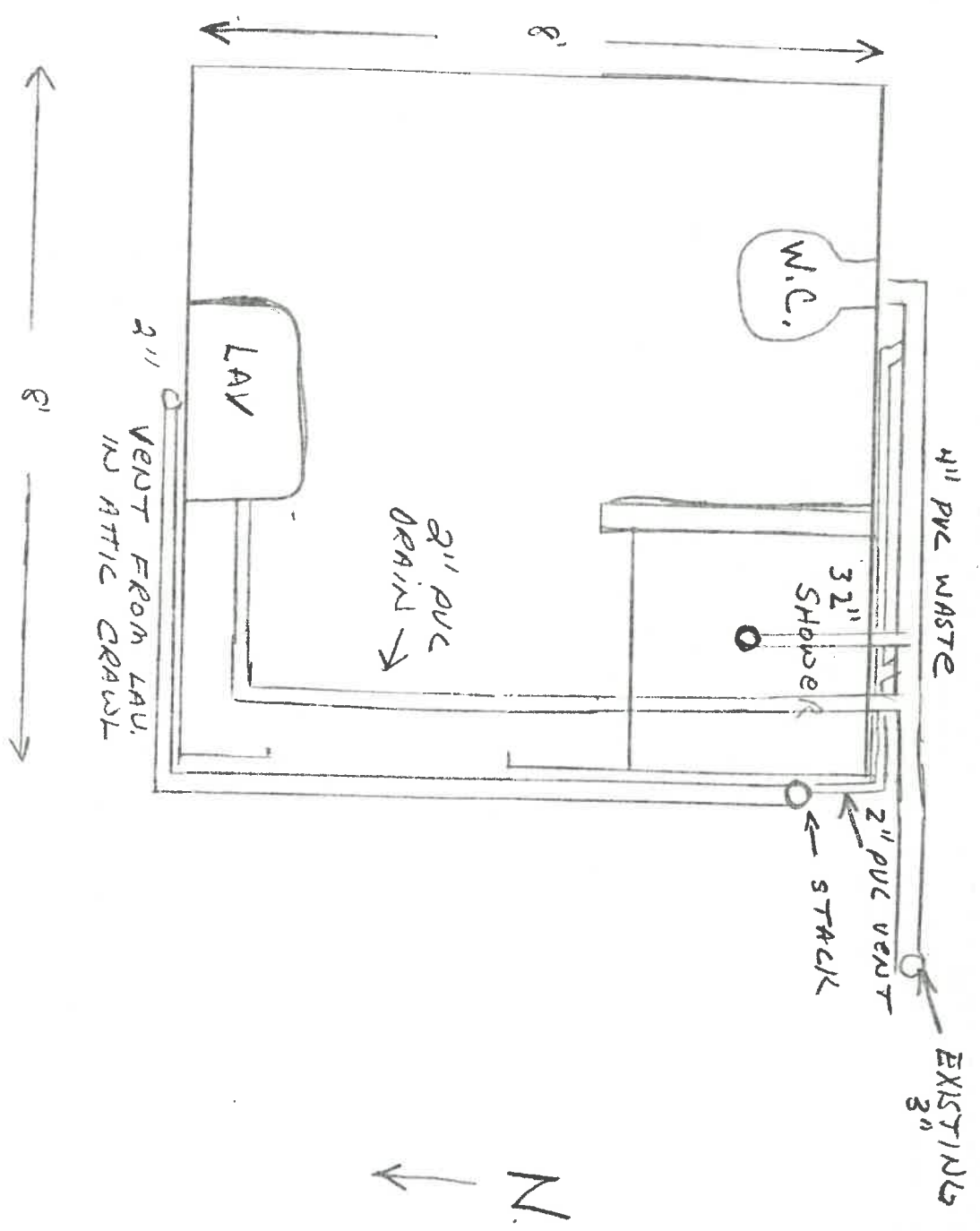
APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: \$ 20000

DATE 1-7-87 APPLICANT'S SIGNATURE Jan Gilliland  
OWNER-CONTRACTOR-AGENT



Jan G. L. H. 200  
844 Hobson

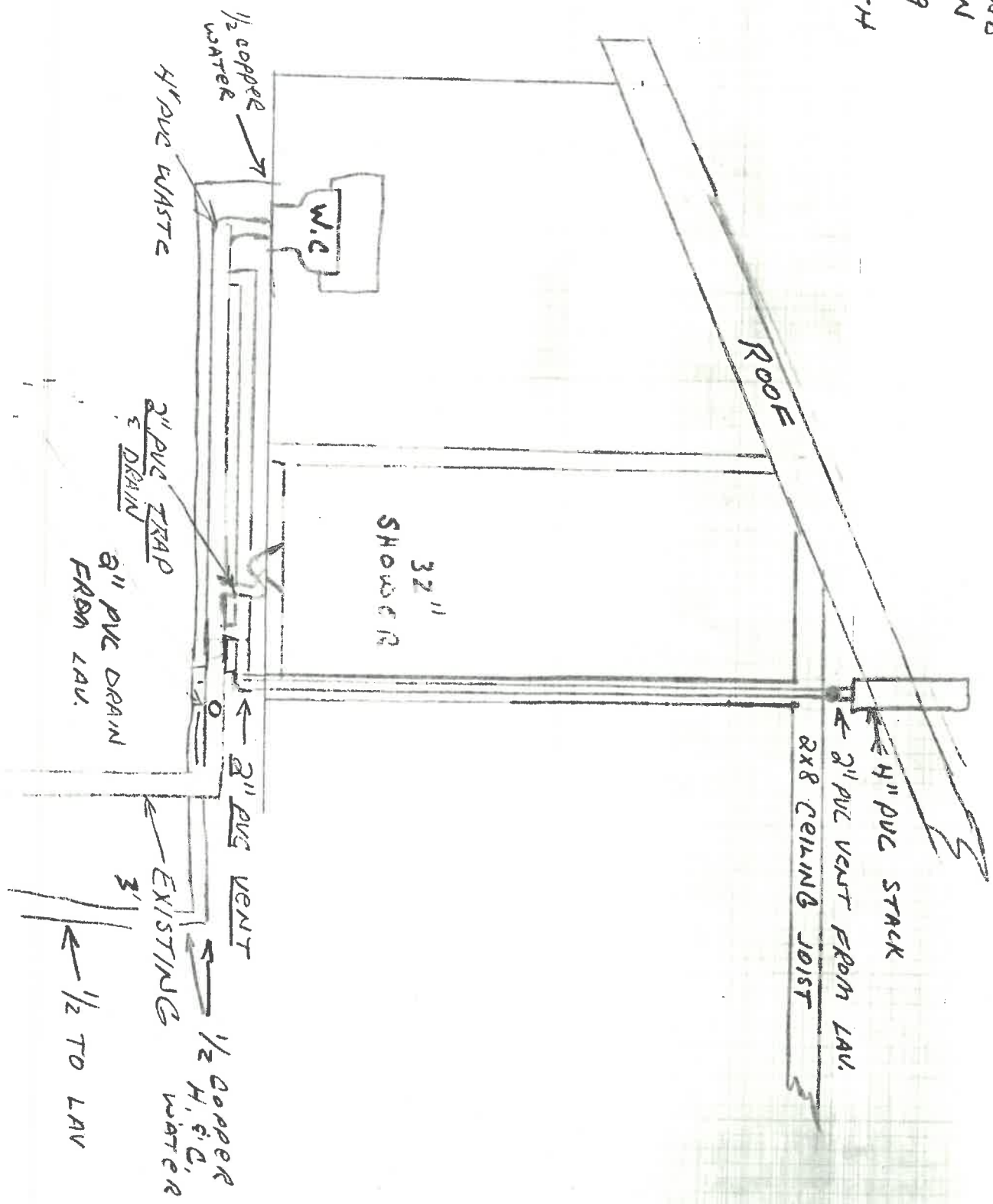




JAN GILLIAND  
BYU HOBSON

PERMIT 01279

2ND FLOOR BATH



NOTE: 1) LAV. WILL HAVE 1 1/2" TRAP

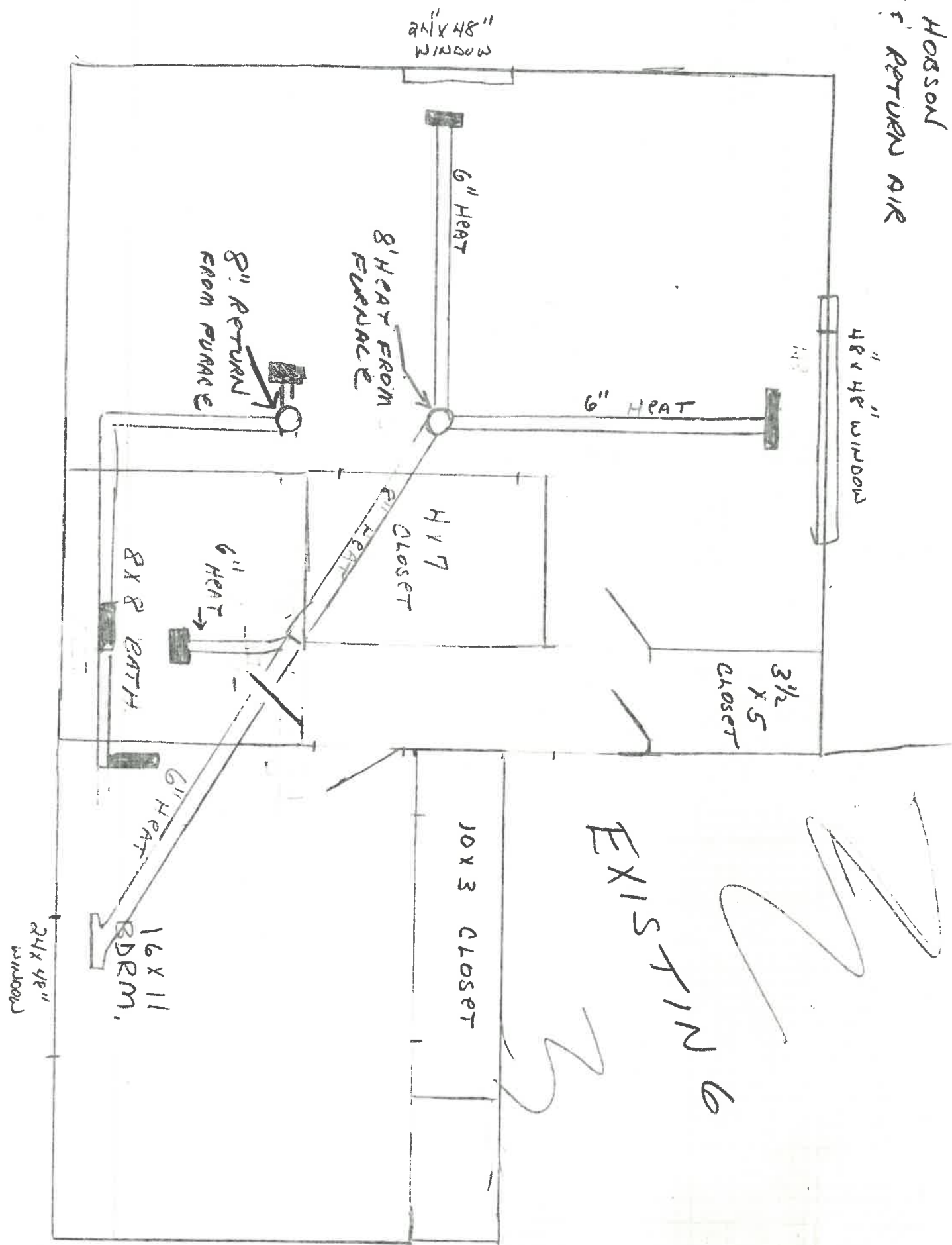
2" DRAIN & VENT.

2) ALL WATER LINE WILL BE 1/2" COPPER



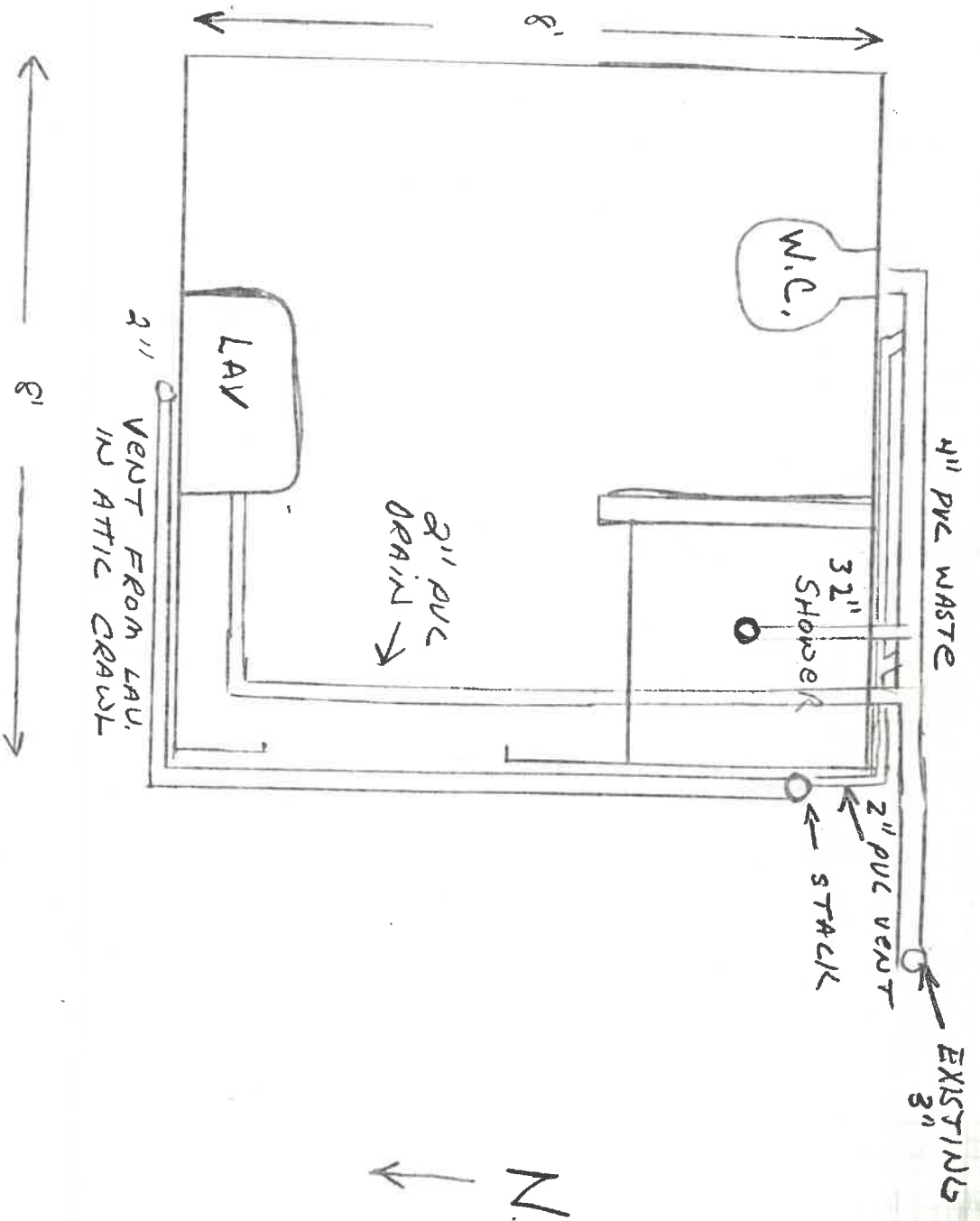


LANE GILLMAN  
844 HOBSON  
HEAT & RETURN AIR



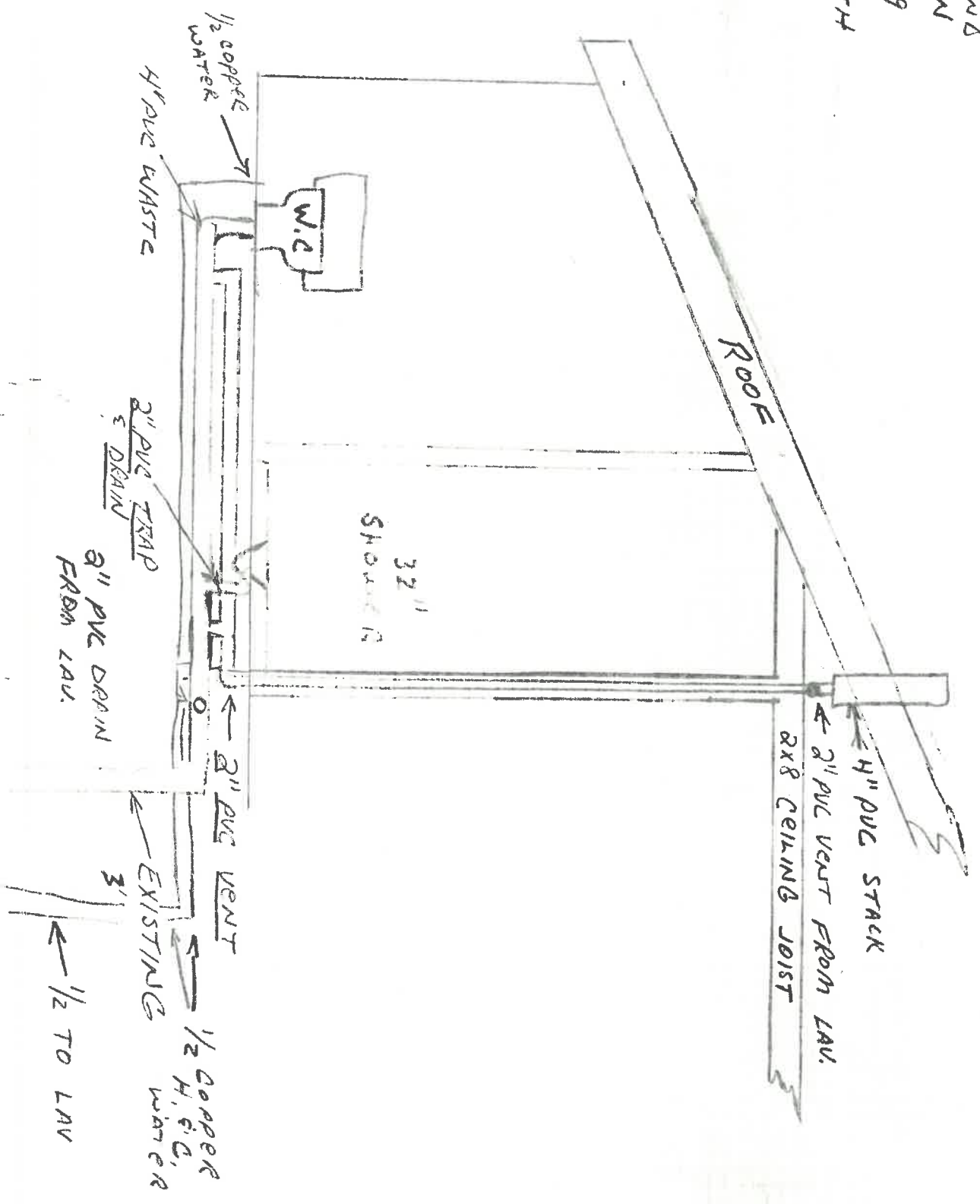


JAN G. 11, 1920  
844 HOSSON





JAN GILLIAND  
 844 HOBSON  
 PERMIT 01379  
 2ND FLOOR BATH

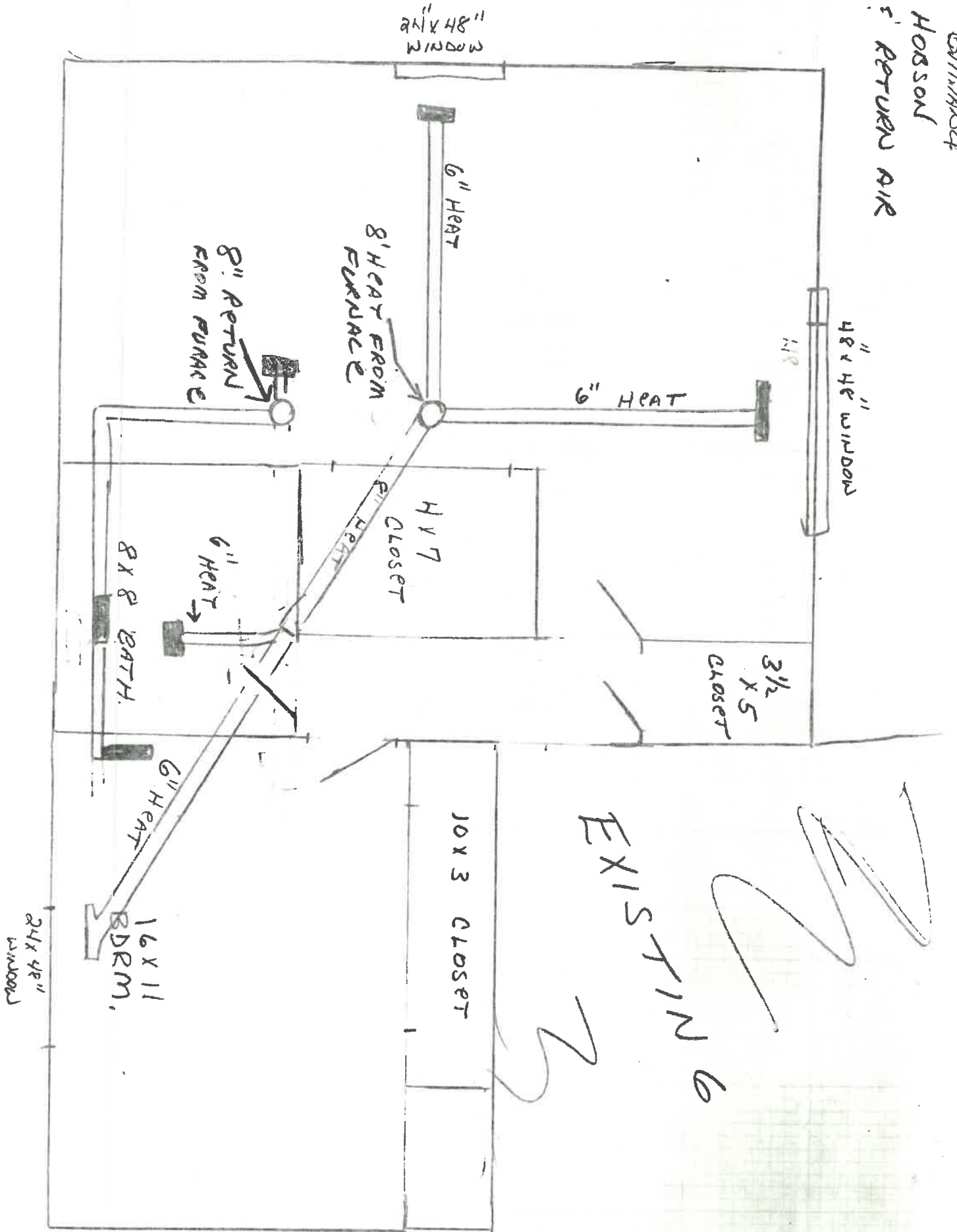


- NOTE: 1) LAV. WILL HAVE 1 1/2" TRAP  
 2" DRAIN & VENT.  
 2) ALL WATER LINE WILL BE  
 1/2" COPPER





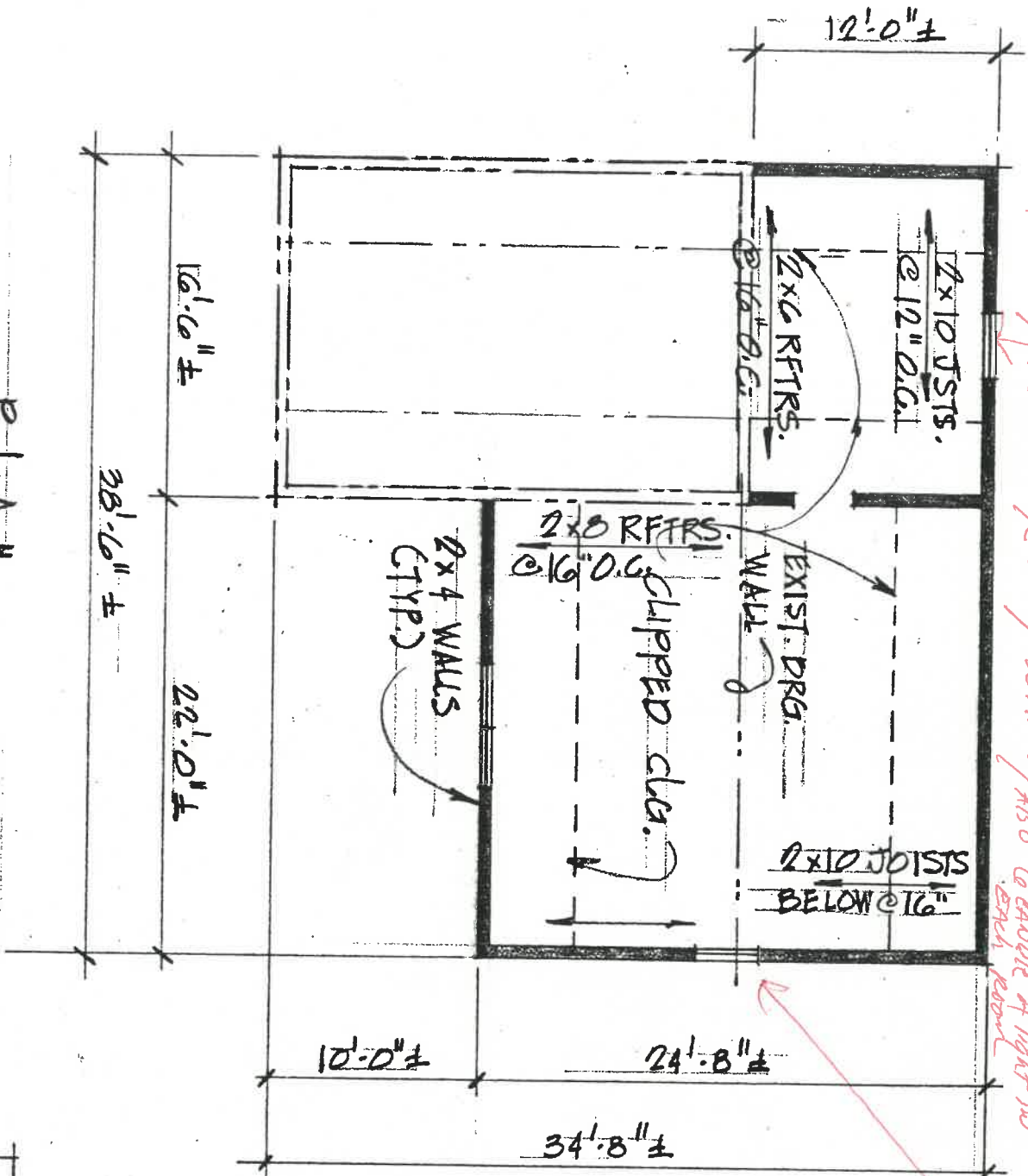
AND GILLMIST  
844 HOSSON  
HEAT & RETURN AIR





\* Will need (4) sq ft of curran for Mechanical Air exchange capable of providing for an exchange every 30 min. Also capable of holding each person

\* Will add additional windows of same size



PLAN

NOTES (If necessary)

- ALL WORK SHALL COMPLY W/ ALL LOCAL AND STATE CODES.
- FRAMING SHALL BE DONE IN WORKMAN-LIKE MANNER
- ALL JOISTS, RAFTERS, AND STUDS SHALL BEAR ON EXISTING LOAD BRG. WALLS.
- JOIST LUMBER SIZES SHN. ARE BASED ON MIN.  $f_b = 900$  P.S.I.
- ALL WORK SHALL BE ERECTED PLUMB, SQUARE, AND/OR LEVEL EXCEPT AS LIMITED BY EXISTING STRUCTURE.
- FLOOR SPACE ADDED = 741 S.F. APPROX.
- ALL RAFTERS SHALL BE MIN.  $f_b = 1100$  P.S.I.

SECOND STORY ADDITION for

DAN SANDY GILILAND  
 844 HOBSON NAPOLEON, OH  
 ROGER CARTER, BUILDER  
 SH # 30# 3

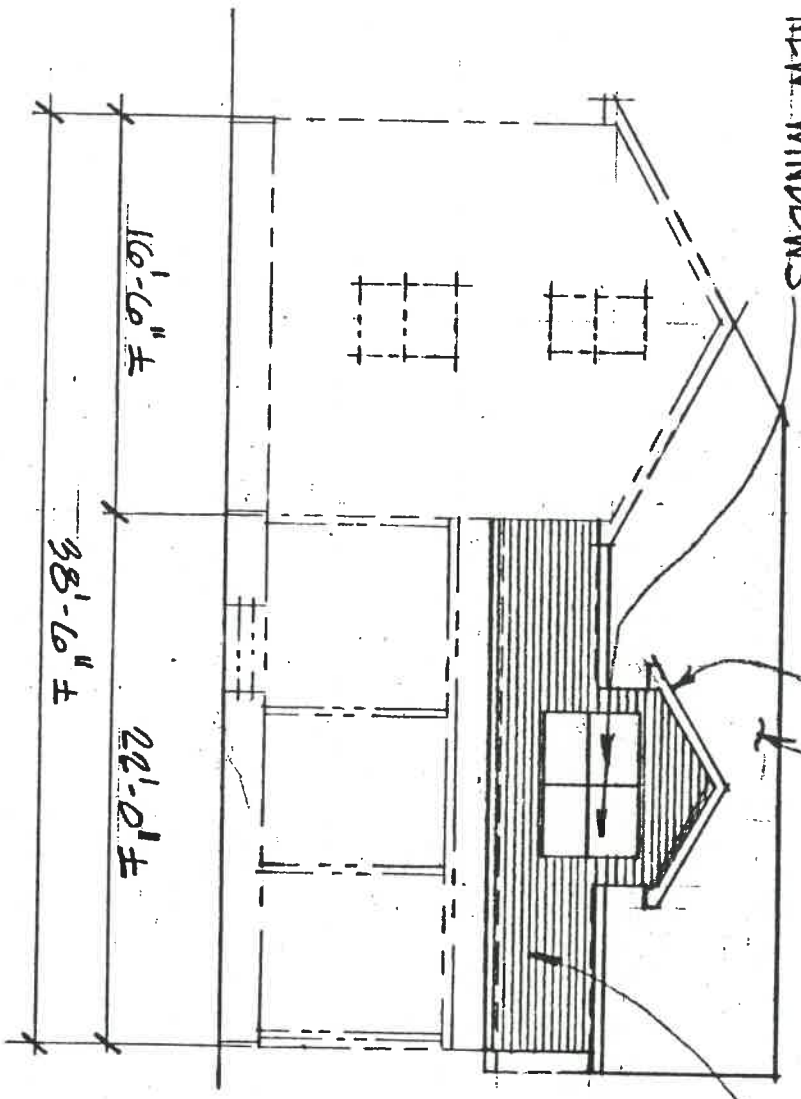
Shirley Dougherty, P.E. 11-9-86



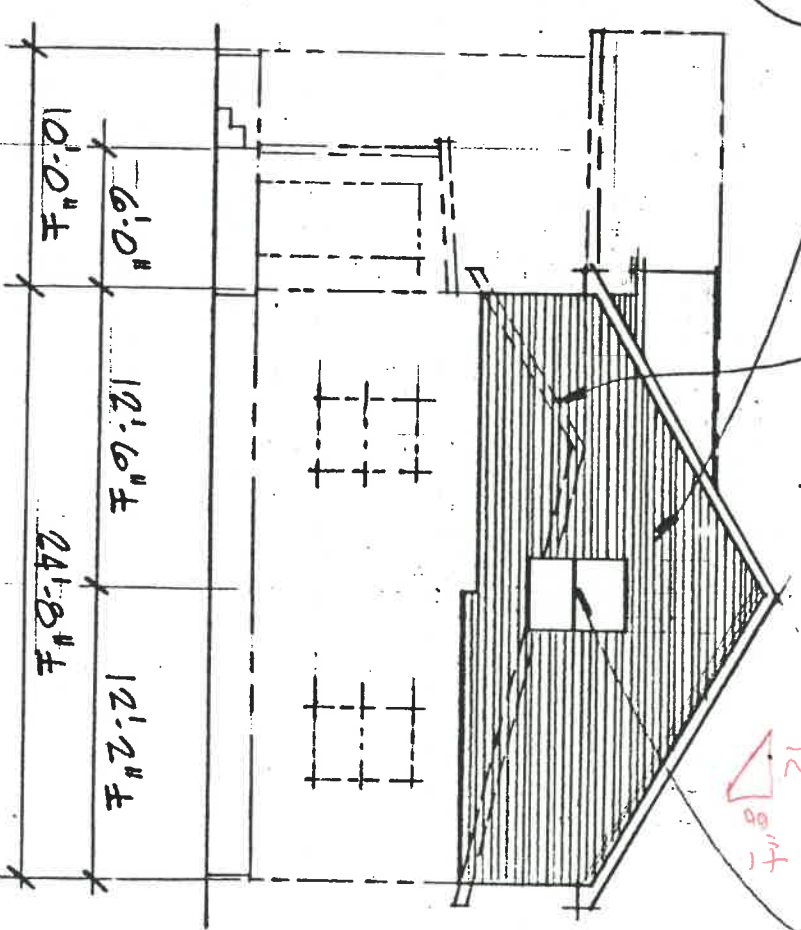
REMOVE EXISTING FIRST FLR.  
ROOF AND CLG. JOISTS; ADD  
SECOND STORY

NEW ROOF  
NEW DORMER  
NEW SIDING  
NEW WINDOWS

NEW WINDOW



FRONT ELEVATION



RIGHT SIDE ELEVATION

SECOND STORY ADDITION

for  
 TAN & SANDY GILLILAND  
 844 HOBSON NAPOLEON, OH.  
 ROGER CARTER, BUILDER

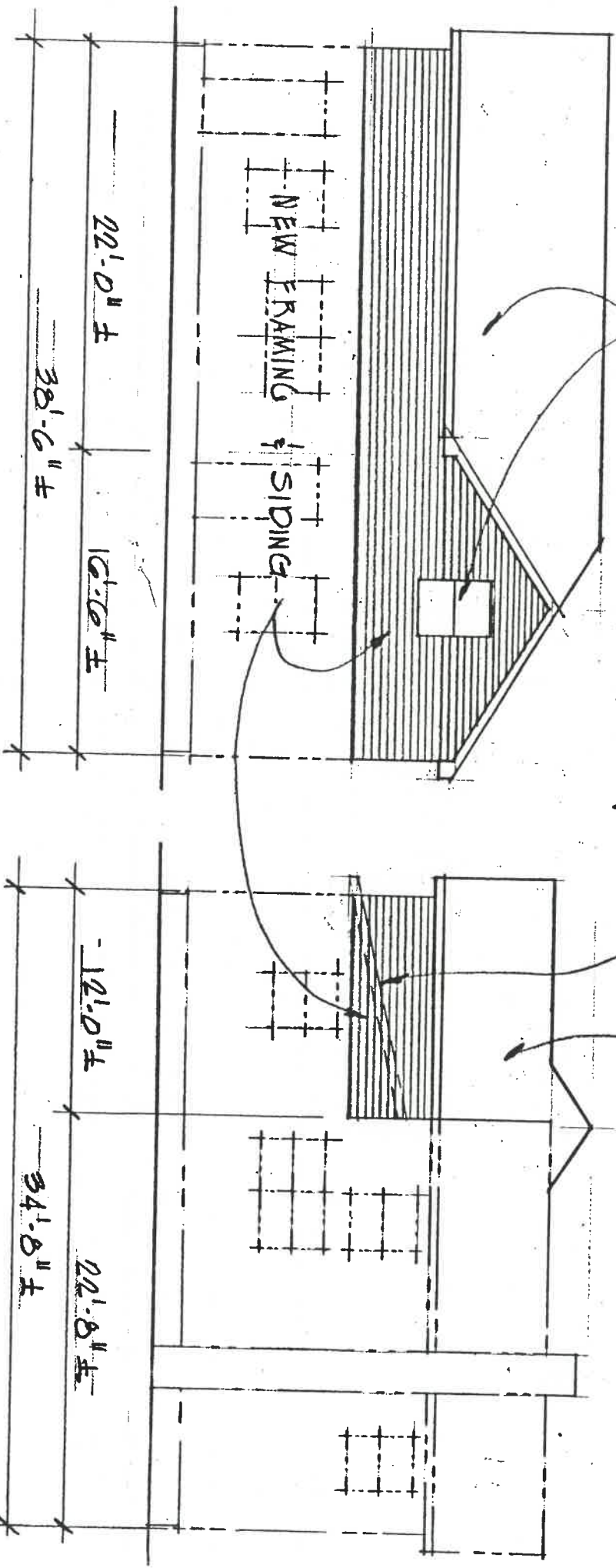
Shirley Dougherty, P.E. 11-4-86



NEW ROOF  
& WINDOW  
#8'x 30'

REMOVE FIRST FLR.  
ROOF & CLG. DSTS;  
ADD SECOND STORY

NEW ROOF



BACK ELEVATION

LEFT SIDE ELEVATION

Warren S. Humphrey, P.E. 11-4-86

SECOND STORY ADDITION  
for

DAN & SANDY GILLILAND  
844 HOBSON NAPOLEON, OH  
ROGER CARTER, BUILDER  
SHT. # 2 OF 3





**ROOFING FINISH**

Asphalt 3/4" shingles

**ROOF PITCH**

Approx 8/12

**RAFTERS**

2x6 or 2x8  
at 16" o.c.

**CEILING JOISTS**

2x6 or 2x8  
at 16" o.c.

*on 16' portion on 24' portion*

**WALL STUDS**

2x4  
at 16" o.c.

*SOFFIT & (GABLE OR ROOF VENTS)*

*DRYWALL*

7'-6" clear floor  
to ceiling height  
(minimum)

**EXTERIOR WALL FINISH**

D-4 Vinyl siding

*Sheathing - plywood  
corners, with 1/2" styrofoam  
between corners.*

**INTERIOR WALL FINISH**

DRYWALL

**FLOOR FINISH**

Carpet

**FLOOR JOISTS**

size 2x10"  
at 16" o.c.

**FOUNDATION BOLT**

1/2" x 10"  
6'-0" o.c. max.

*3/4" T+G  
SUB FL.*

Top of foundation  
to grade - 8" min.

**FOUNDATION WALL**

thickness 8"  
depth 7' basement

**FOOTER**

width \_\_\_\_\_  
depth \_\_\_\_\_

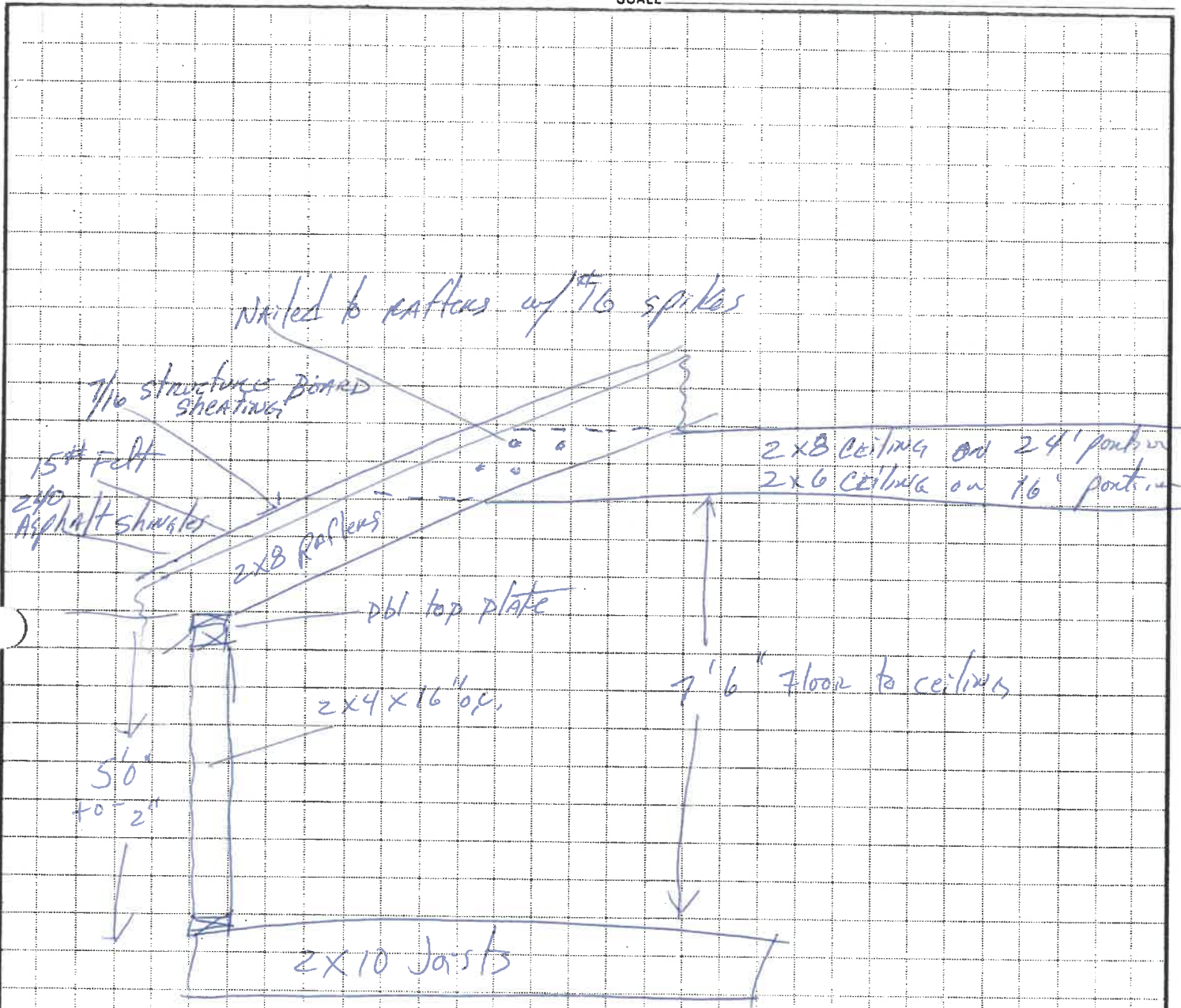
*Existing 1st floor*

- ① 2x4 Framing 24" o.c.
- ② Floor joist 16" o.c.
- ③ New vinyl siding
- ④ 1/2" (plaster or) walls
- ⑤ Existing basement appears sound and dry.

*ALL EXTERIOR  
WALL HEADERS 2x12-2*

*LUMBER F.P.S.*









# PERMIT

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

Permit No. 01279 Issued 11-13-86  
date

Job Location 844 Hobson St.  
address

Lot ~~78178~~ Philliby Stanford 4th Add.  
sub-div or legal discript

Issued By Eldon Huber  
building official

Owner Jan Gilliland 592-7713  
name tel.

Address 844 Hobson St.

Agent Roger Carter Builders 875-6552  
builder-eng.-etc. tel.

Address R.R. 2 Box 267 Liberty Center, Ohio

Description of Use Residence

---

Residential 1  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New  Add'n.  Alter \_\_\_\_\_ Remodel \_\_\_\_\_

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 25,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	3.00	43.50	46.50
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<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.....			\$46.50
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

### ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
C	66' x 165'	10890 S.F.	28.5'	10' B. 17.4'	
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	
35'	2 - Min.		45% Max.		

### WORK INFORMATION:

Size: Length 38'6" Width 34'8" Stories 2 Second Floor Add. 741 S.F.  
 Height 24'0" Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.  
 Ground Floor Area 1115 Existing

Electrical: Apply for seperately  
brief description

Plumbing: N.A.  
brief description

Mechanical: Apply for seperately  
brief description

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
type

Additional Information: Addition to the 2nd story of an existing residence

Date Nov 17 Applicant Signature Roger W. Carter owner-agent

**PAID**  
 NOV 17 1986  
 CITY OF NAPOLEON

# INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
<b>PLUMBING</b>	Building Drains			Drainage, Waste & Vent Piping	12/29	EH	Indirect Waste			Drainage, Waste & Vent Piping		
	Water Piping									Backflow Prevention		
	Building Sewer			Water Piping			Condensate Lines			Water Heater		
	Sewer Connection									FINAL APPROVAL		
<b>MECHANICAL</b>	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		
<b>ELECTRICAL</b>	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		
<b>BUILDING</b>	Location, Set-backs, Esmt(s)			Exterior Wall Construction	12/4	EH	Roof Covering Roof Drainage	12/29	EH	Smoke Detector		
	Excavation						Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction	12/29	EH	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	12/29	EH			
	Piles			Floor System(s)						FINAL APPROVAL BLDG. DEPT.		
			Roof System	12/4	EH	Special Insp Reports Rec'd			Certificate of Occupancy Issued			
<b>ADDITIONAL</b>	<b>INSPECTIONS, CORRECTIONS, ETC.</b>						<b>INSPECTIONS, CORRECTIONS, ETC.</b>					
	DEMOLITION						11/86 EH					
	PAID											
	CITY OF WASHINGTON											



RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON  
255 West Riverview Ave.  
Napoleon, Ohio 43545  
419/592-4010

ADDENDUM TO Permit No. 01279  
Owner JAN KILLICAND  
Contractor ROPER CARPER BUILDERS  
Location 844 HOBSON

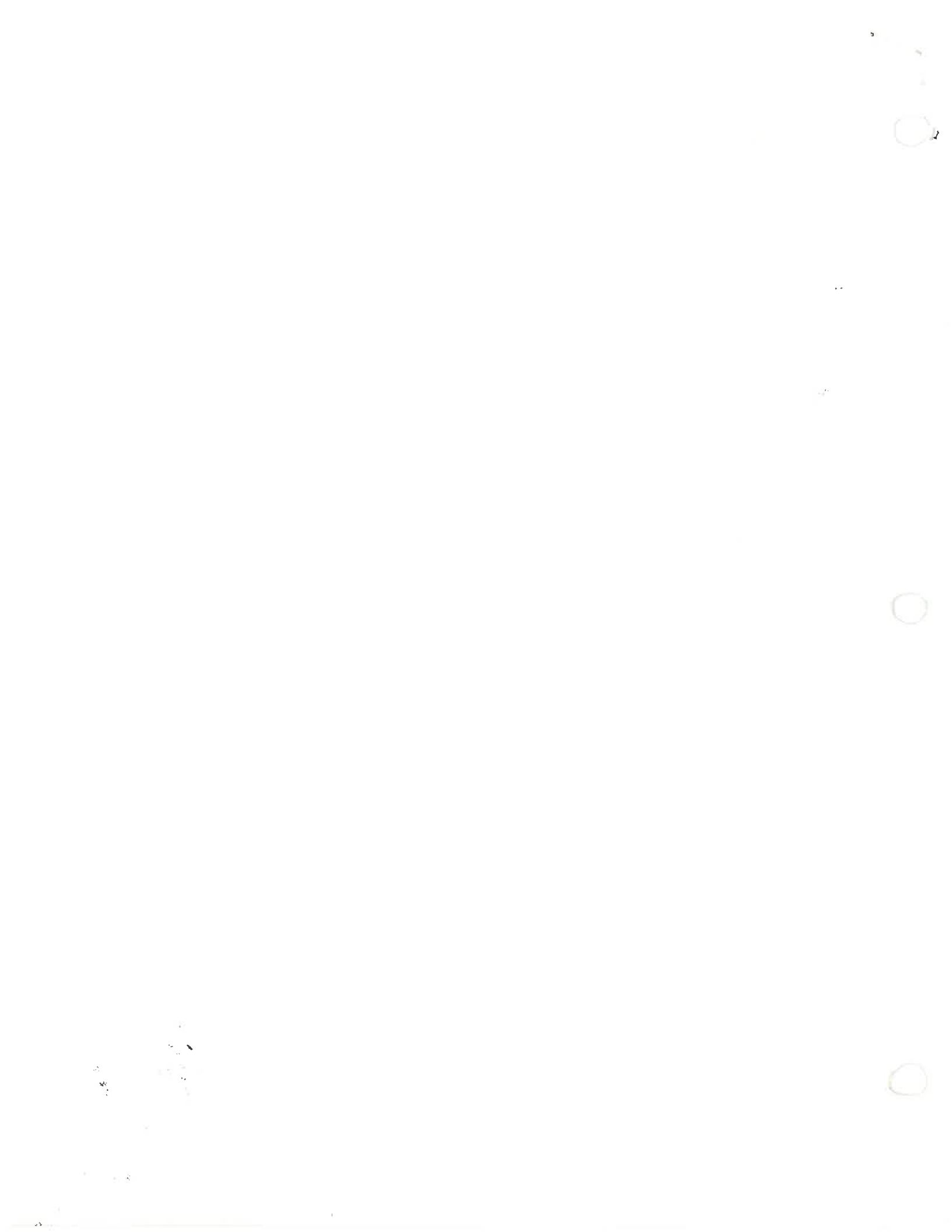
Please note the items checked below and incorporate them into your plans as indicated:  PERMIT NOT YET ISSUED, CORRECT PLANS AND RE-SUBMIT.  PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL		Show size of members supporting porch roof.	
<input checked="" type="checkbox"/> Provide approved smoke detector(s) as req'd.		<input checked="" type="checkbox"/> Provide double top plate for all bearing partitions and exterior walls.	
Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.		Provide design data for prefab wood truss.	
Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)		Ceiling joists undersized in _____	
Submit fully dimensioned plot plan.		Roof rafters undersized in _____	
Provide min. of 1-3'0" x 6'8" exit door.		PLUMBING AND MECHANICAL	
<input checked="" type="checkbox"/> Provide min. 22" x 30" attic access opening.		<input checked="" type="checkbox"/> Terminate all exhaust systems to outside air.	
Provide min. 18" x 24" crawl space access opening.		<input checked="" type="checkbox"/> Insulate ducts in unheated areas.	
Provide approved sheathing or flashing behind masonry veneer.		Provide backflow prevention device on all hose bibs.	
Provide min. 15# underlayment on roof.		Terminate pressure and temperature relief valve drain in an approved manner.	
Provide adequate fireplace hearth.		Provide dishwasher drain with approved air gap device.	
Install factory built fireplaces/stoves according to manufacturers instructions.		METAL VENEERS	
<input checked="" type="checkbox"/> Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney. <i>FLUES INCLUDED</i>		Contact City Utilities Dept. to remove conductors and/or meter.	
LIGHT AND VENTILATION		Provide approved system of grounding and bonding.	
Provide mechanical exhaust or window in bathroom _____		ELECTRICAL	
Provide min. _____ Sq. In. net free area attic ventilation.		Show location of service entrance panel and service equipment panel.	
Provide min. _____ Sq. In. net free area crawl space ventilation.		G. F. C. I. req'd. on temporary electric.	
FOUNDATION		Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.	
Min. depth of foundation below finished grade is 32".		Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.	
Min. size of footer _____" x _____"		Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.	
Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.		INSPECTIONS	
Show size of basement columns.		The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.	
FRAMING		Footers and Setbacks.	Building sewer.
Show size of wood girder in _____		Foundation.	HVAC rough-in.
Provide design data for structural member in _____		Plumbing rough-in.	<input checked="" type="checkbox"/> Final Building
Floor joists undersized in _____		Plumbing final.	other.
Provide double joists under parallel bearing partitions.		Electrical service.	<input checked="" type="checkbox"/> BUILDING FRAMING
<input checked="" type="checkbox"/> Provide 1" x 4" let in corner bracing, approved sheathing, or equal.		Electrical rough-in.	
Show size of headers for openings over 4' wide _____		Electrical final	

Additional Corrections. PROVIDE EITHER MECHANICAL VENTILATION (1-AIR CHANGE EVERY 30 MIN) AND 6- F.C. OF LIGHT OR 8% OF THE FLOOR AREA = MIN WINDOW SIZE,

The approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No. 01279 and made a part thereof. DATE APPROVED OR DISAPPROVED 11-13-86 Checked by 54 Plan Examiner.

DATE RECHECKED AND APPROVED \_\_\_\_\_ Checked by \_\_\_\_\_



# PERMIT

## CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 01289 Issued 12-15-86  
date

Job Location 844 Hobson St.  
address

Lot 178 Phillips & Stafford's 4th Add.  
sub-div or legal discript

Issued By Eldon Huber  
building official

Owner Jan Gilliland  
name tel.

Address 844 Hobson St.

Agent Mikes Electric  
builder-eng.-etc. tel.

Address 1048 E. Riverview

Description of Use Residence

---

Residential 1  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel X

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 200.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input checked="" type="checkbox"/> ELECTRICAL	5.00	2.00	7.00
<input type="checkbox"/> PLUMBING			
<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.....			7.00
LESS MIN. FEES PAID _____			
		<small>date</small>	
BALANCE DUE.....			

### ZONING INFORMATION N/A

district	lot dimensions	area	front yd	side yds	rear yd
C					
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: 2 - new circuits  
brief description

Plumbing: N/A  
brief description

Mechanical: N/A  
brief description

Sign: N/A Dimensions \_\_\_\_\_ Sign Area **PAID**  
type

Additional Information: Refer to permit no. 01279

Date 12-22-86 Applicant Signature [Signature] owner-agent

**DEC 22 1986**

**CITY OF NAPOLEON**



# INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
<b>PLUMBING</b>	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		
<b>MECHANICAL</b>	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		
<b>ELECTRICAL</b>	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		
<b>BUILDING</b>	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.		
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
<b>ADDITIONAL</b>	<b>INSPECTIONS, CORRECTIONS, ETC.</b>						<b>INSPECTIONS, CORRECTIONS, ETC.</b>					

DEC 5 1988  
CITY OF HOUSTON