

**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**

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

Permit No. 02164 Issued 11-27-90  
date

Job Location 904 Hobson, Napoleon, Ohio  
address

Lot 182 A. Coreys Alteration  
sub-div or legal discript

Issued By Brent N. Damman  
building official

Owner Jerry Tonjes  
name tel.

Address \_\_\_\_\_

Agent Jim Speiser & Sons 599-1846  
builder-eng.-etc. tel.

Address P.O. Box 545, Napoleon, Ohio

Description of Use Residence

Residential 1  
no. dwelling units

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

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

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

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

Estimated Cost \$ 300.00

**ZONING INFORMATION**

district <b>C</b>	lot dimensions <b>65 x 105</b>	area <b>6825</b>	front yd <b>25</b>	side yds <b>5</b>	rear yd <b>15</b>
max hgt <b>35'</b>	no pkg spaces <b>2 per</b>	no ldg spaces	max cover <b>45%</b>	petition or appeal req'd	date appr

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input checked="" type="checkbox"/> ELECTRICAL			<b>15.00</b>
<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.....			<b>15.00</b>
LESS MIN. FEES PAID <u>11-27-90</u> <small>date</small>			<b>15.00</b>
BALANCE DUE.....			<b>0.00</b>

**WORK INFORMATION:**

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

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

Electrical: Service change only.  
brief description

Plumbing: \_\_\_\_\_  
brief description

Mechanical: \_\_\_\_\_  
brief description

Sign: \_\_\_\_\_ Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_

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

Date 11-27-90 Applicant Signature *Jim Speiser* **PAID**  
owner-agent **NOV 27 1990**  
**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>					
	8/12/9						Service drop to lower over garage roof.					
	NOV 5 9 1991						this information was passed on to Jerry Tonjes + Speiser Electric					
	NOV 10 1991											

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. 02164 Issued 27 Nov 90

Job Location 904 HOBSON W.P.O.

Lot 182 A. Corcys Alteration  
sub-div. or legal disc.

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

Owner JERRY TOUJES Pn \_\_\_\_\_

Address \_\_\_\_\_

Agent JIM SPICER & SONS Pn 599-1846

Address P O Box 545 W.P.O.

Description of Use Residence

Residential 1  
no. dwelling units

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

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

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

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

Estimated Cost \$ 300.00

**-ZONING INFORMATION**

district	lot dimensions	area	front yd	side yds.	rear yd
<u>C</u>	<u>65 X 105</u>	<u>6825</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>15%</u>		

**WORK INFORMATION:**

**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 \_\_\_\_\_

Ch. Permits Reg.	Base	Fees Plus	Total
<input type="checkbox"/> Building	_____	_____	_____
<input checked="" type="checkbox"/> Electrical	_____	_____	<u>15.00</u>
<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	_____
Total Fees.....			<u>15.00</u>
Less Min. Fees Pd. <u>11-27-90</u>			<u>15.00</u>
Balance Due.....			<u>0</u>

**PAID**

**NOV 27 1990**

**CITY OF NAPOLEON**

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

ELECTRICAL: Electrical Contractor JIM SPRISER & SON'S Pn. 549-1846  
 Address PO Box 545 WAP O. Estimated Cost \$ 300.00  
 Type of work: New  Service change  Rewiring  Additional Wiring  Temp. Elec. Req.   
 Size of service 100 A Underground  Overhead  No. of new circuits NONE yes  no   
 Description of work: SERVICE CHANGE ONLY

PLUMBING: Plumbing Contractor \_\_\_\_\_ Pn. \_\_\_\_\_  
 Address \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_  
 Water Tap Req.  Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_ type  
                   yes    no  
 San. Sewer Tap Req.  Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_ type  
                   yes    no  
 St. Sewer Tap Req.  Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Street to be Opened \_\_\_\_\_ type  
                   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 11-27-90 Signature of Applicant [Signature] NOV 27 1990  
 Application not valid without **CITY OF NAPOLEON**

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. 0051-90 Issued 27 Nov 90 Building permit No. 02164 Job Address 904 Hobson

Lot Number \_\_\_\_\_ Sub Division \_\_\_\_\_

Owner Jerry Tanjes Owners Address 825 Hobson Pn. No. 592-6085

Contractor Jim Speiser & Son Contractors Address PO Box 545 Pn. No. 599-1846

Size of Service 100 AMP Overhead  Underground \_\_\_\_\_ Issued By Roger O Freytag

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



