

PERMIT

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

Permit No. 01199 Issued 7-7-86
date

Job Location 907 Hobson St.
address

Lot 183 Phillips & Staffords 4th Add.
Partial sub-div or legal discript

Issued By Eldon Huber
building official

Owner Mike Wagner 592-1426
name tel.

Address 907 Hobson St.

Agent Self
builder-eng.-etc. tel.

Address 907 Hobson St.

Description of Use Residential

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter X Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 400.00

	FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING		3.00		3.00
<input type="checkbox"/> ELECTRICAL				
<input type="checkbox"/> PLUMBING				
<input type="checkbox"/> MECHANICAL				
<input type="checkbox"/> DEMOLITION				
<input type="checkbox"/> ZONING				
<input type="checkbox"/> SIGN				
WATER TAP				
SEWER TAP				
TEMP. ELECT.				
ADDITIONAL PLAN REVIEW	Struct. _____ hrs			
	Elect. _____ hrs			
TOTAL FEES.....				\$3.00
LESS MIN. FEES PAID _____				
				<small>date</small>
BALANCE DUE.....				

ZONING INFORMATION

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

WORK INFORMATION: Within Existing House

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 _____
type

Additional Information: Add 1 - window and 1 - interior wall-provide smoke detectors in each story next to sleeping rooms. Call for final inspection when work is complete.

Date 7-7-86 Applicant Signature Michael Wagner
owner-agent

PAID

JUL 7 1986

CITY OF NAPOLEON

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-582-4010

Permit No. 01199 Issued _____ date _____
 Job Location 907 HOBSON ST. address _____
 Lot 183 PHILLIPS + STAFFORDS #7H sub-div or legal discript ADD.
 Issued By EH building official _____
 Owner MIKE WAGNER 592-1426 name _____
 Address 907 HOBSON ST.
 Agent SELF
 Address SAME
 Description of Use RESIDENTIAL
 Residential _____
 Commercial _____
 Use _____
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 400.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	<u>3.00</u>		<u>3.00</u>
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> FINISH			
<input type="checkbox"/> WATER TAP			
<input type="checkbox"/> SEWER TAP			
<input type="checkbox"/> ADDITIONAL PLAN REVIEW			
TOTAL FEES			<u>3.00</u>
LESS MIN. FEES PAID			<u>3.00</u>
BALANCE DUE			<u>0.00</u>

ZONE INFORMATION

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

WORK INFORMATION:

WITHIN EXISTING HOUSE

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: _____ type _____ Dimensions _____ Sign Area _____

Additional Information: ADD 1-WINDOW ADD 1 INTERIOR WALL

PROVIDOR SMOKE DETECTORS ON EACH STOREY UNIT TO SLEEPING ROOMS, CALL FOR FINAL INSPECTION WHEN WORK IS COMPLETE

Date _____ Applicant Signature _____ owner-agent _____

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

907 HOBSON ST

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 South Wall 907 Hobson St ~~907 Hobson St~~ Cost of project 400.00 ~~200.00~~

Owner's Name MIKE WAGNER Address 907 Hobson St
Napoleon, Ohio

Contractor _____ Telephone No. _____

Address _____

Lot Information: (Not required for siding job)

Lot No. 183 CENTER Subdivision PHILLIPS + STAFFORDS 9TH ADD

Zoning District _____ Lot Size _____ ft. X _____ ft. Area _____ sq. ft.

Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential YES Commercial _____ Industrial _____

New Construction _____ Addition _____ Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: ----- INSTALL A WINDOW AND
put up a wall in dining room

Size: Length 60ft Width 40ft No. of Stories 2

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: INSTALL 1-WINDOW

wall dimensions 8h X 15' w.

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 7-2-86 Applicant's Signature Michael H Wagner

PERMIT NO. _____
PERMIT FEE \$ _____

