

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 01242 Issued 9-4-86
date

Job Location 60 Joliette Dr.
address

Lot 75 Riviera Heights 2nd Add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Nancy Jo Buckham
name tel.

Address 60 Joliette Dr. Napoleon, Ohio

Agent Gene Waisner 762-5093
builder-eng.-etc. tel.

Address R.R. 3 Napoleon, Ohio 43545

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 5,500.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	3.00	15.00	18.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input checked="" type="checkbox"/> ZONING			.00
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			\$18.00
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district <u>A</u>	lot dimensions <u>78.89' X 125'</u>	area <u>9862 S.F.</u>	front yd <u>30' Min.</u>	side yds <u>7' 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>35% Max.</u>	petition or appeal req'd	date appr

WORK INFORMATION:

Size: Length 21' Width 12' Stories 1 Ground Floor Area 252 Sq. Ft.

Height 12' Building Volume (for demo. permit) _____ cu. ft.

Electrical: 2-Outlets, 1-Light Fixture. No Permit Required
brief description

Plumbing: N.A.
brief description

Mechanical: N.A.
brief description

Sign: _____ Dimensions _____ Sign Area _____

Additional Information: _____

PAID
SEP 4 1986
 CITY OF NAPOLEON

Date 9/4/86 Applicant Signature Nancy Jo Buckham
owner-agent

INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
PLUMBING	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		
MECHANICAL	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		
ELECTRICAL	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		
BUILDING	Location, Set-backs, Esmt(s)		EH	Exterior Wall Construction	9/26	EH	Roof Covering Roof Drainage			Smoke Detector		
	Excavation		EH				Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing		EH				<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls		EH	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.	10/27	EH
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	① INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					
	ADD SOLID WOOD BLK'S (19/26) EH											
	DOWN CEIL JOISTS											
	RANDOM INSPECTION 10/5 EH											

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01242

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

Permit No. [REDACTED] Issued _____ date _____

Job Location 60 JOLIETTE DR address _____

Lot 75 RIVIERA HEIGHTS 2ND ADD sub-div or legal discript _____

Issued By EJ building official _____

Owner M NADY JO BUCKHAM name _____ tel. _____

Address 60 JOLIETTE DR, NAP. OH _____

Agent BEVE WAINNER 762-5093 builder-eng.-etc. _____ tel. _____

Address RR 3 NAP OH 43545 _____

Description of Use RESIDENCE _____

Residential 1 no. dwelling units _____

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 5500.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	3.00	15.00	18.00
<input type="checkbox"/> ELECTRICAL			18.00
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input checked="" type="checkbox"/> ZONING			1.00
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			18.00
LESS MIN. FEES PAID _____ date _____			
BALANCE DUE.....			

ZONING INFORMATION

district <u>A</u>	lot dimensions <u>78.89' x 125'</u>	area <u>9862</u>	front yd <u>30' MIN.</u>	side yds <u>7' 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>35% MAX</u>	petition or appeal req'd	date appr

WORK INFORMATION:

Size: Length 21' Width 12' Stories 1 Ground Floor Area 252 SQ. FT.

Height 12' Building Volume (for demo. permit) _____ cu. ft.

Electrical: 2-007LEYS LIGHT FIX. NO PERMIT REQ.
brief description _____

Plumbing: N.A.
brief description _____

Mechanical: N.A.
brief description _____

Sign: _____ type _____ Dimensions _____ Sign Area _____

Additional Information: _____

Date _____ Applicant Signature _____ owner-agent _____

RESIDENTIAL PLAN CORRECTION SHEET

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

ADDENDUM TO Permit No. 01242
Owner WALTER J. TRUCKHALL
Contractor LEE B. BUNCKER
Location 60 YOLLETTE

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			
<input type="checkbox"/>	Provide approved smoke detector(s) as req'd.	<input type="checkbox"/>	Show size of members supporting porch roof.
<input type="checkbox"/>	Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.	<input type="checkbox"/>	Provide double top plate for all bearing partitions and exterior walls.
<input type="checkbox"/>	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)	<input type="checkbox"/>	Provide design data for prefab wood truss.
<input type="checkbox"/>	Submit fully dimensioned plot plan.	<input type="checkbox"/>	Ceiling joists undersized in _____.
<input type="checkbox"/>	Provide min. of 1-3'0" x 6'8" exit door.	<input type="checkbox"/>	Roof rafters undersized in _____.
<input type="checkbox"/>	Provide min. 22" x 30" attic access opening.	PLUMBING AND MECHANICAL	
<input type="checkbox"/>	Provide min. 18" x 24" crawl space access opening.	<input type="checkbox"/>	Terminate all exhaust systems to outside air.
<input type="checkbox"/>	Provide approved sheathing or flashing behind masonry veneer.	<input type="checkbox"/>	Insulate ducts in unheated areas.
<input type="checkbox"/>	Provide min. 15# underlayment on roof.	<input type="checkbox"/>	Provide backflow prevention device on all hose bibs.
<input type="checkbox"/>	Provide adequate fireplace hearth.	<input type="checkbox"/>	Terminate pressure and temperature relief valve drain in an approved manner.
<input type="checkbox"/>	Install factory built fireplaces/stoves according to manufacturers instructions.	<input type="checkbox"/>	Provide dishwasher drain with approved air gap device.
<input type="checkbox"/>	Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.	METAL VENEERS	
LIGHT AND VENTILATION		<input type="checkbox"/>	Contact City Utilities Dept. to remove conductors and/or meter.
<input type="checkbox"/>	Provide mechanical exhaust or window in bathroom _____.	<input type="checkbox"/>	Provide approved system of grounding and bonding.
<input type="checkbox"/>	Provide min. <u>242</u> Sq. In. net free area attic ventilation.	ELECTRICAL	
<input type="checkbox"/>	Provide min. _____ Sq. In. net free area crawl space ventilation.	<input type="checkbox"/>	Show location of service entrance panel and service equipment panel.
FOUNDATION		<input type="checkbox"/>	G. F. C. I. req'd. on temporary electric.
<input checked="" type="checkbox"/>	Min. depth of foundation below finished grade is 32".	<input type="checkbox"/>	Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.
<input type="checkbox"/>	Min. size of footer _____" x _____".	<input type="checkbox"/>	Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.
<input checked="" type="checkbox"/>	Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.	<input type="checkbox"/>	Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.
<input type="checkbox"/>	Show size of basement columns.	INSPECTIONS	
FRAMING		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.	
<input type="checkbox"/>	Show size of wood girder in _____.	<input checked="" type="checkbox"/>	Footers and Setbacks.
<input type="checkbox"/>	Provide design data for structural member in _____.	<input type="checkbox"/>	Building sewer.
<input type="checkbox"/>	Floor joists undersized in _____.	<input type="checkbox"/>	HVAC rough-in.
<input type="checkbox"/>	Provide double joists under parallel bearing partitions.	<input checked="" type="checkbox"/>	Final Building other,
<input type="checkbox"/>	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.	<input checked="" type="checkbox"/>	PRILING FRAMING
<input type="checkbox"/>	Show size of headers for openings over 4' wide _____.	<input type="checkbox"/>	Electrical service.
		<input type="checkbox"/>	Electrical rough-in.
		<input type="checkbox"/>	Electrical final

Additional Corrections. PROVIDE SMOKE DETECTORS AS REQ.

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. 01242 and made a part thereof. DATE APPROVED OR DISAPPROVED 9-9-06 Checked by EH Plan Examiner.

DATE RECHECKED AND APPROVED _____ Checked by _____

FIELD CORRECTION NOTICE

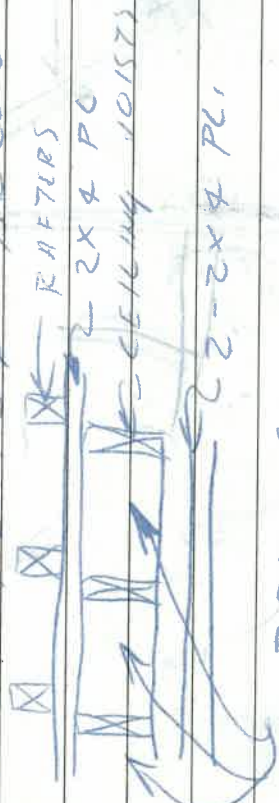
LOCATION 60 VOCLLETTE PERMIT NO. 01242

ISSUED TO NANCY JO ROCKHAW
PERMIT HOLDER AND/OR ALL RESPONSIBLE PARTIES.

NOTICE DELIVERED TO _____

Upon inspection, violations of the _____ Sec. _____ were in evidence.

The following orders are hereby issued for their correction:

AOD SOLID FULL HT. 2X BLOCKING
BETWEEN CEILING JOISTS ABOVE
WALL PLATE & BELOW ~~CEILING~~ RAFTERS

AOD SOLID 2X BLOCKING

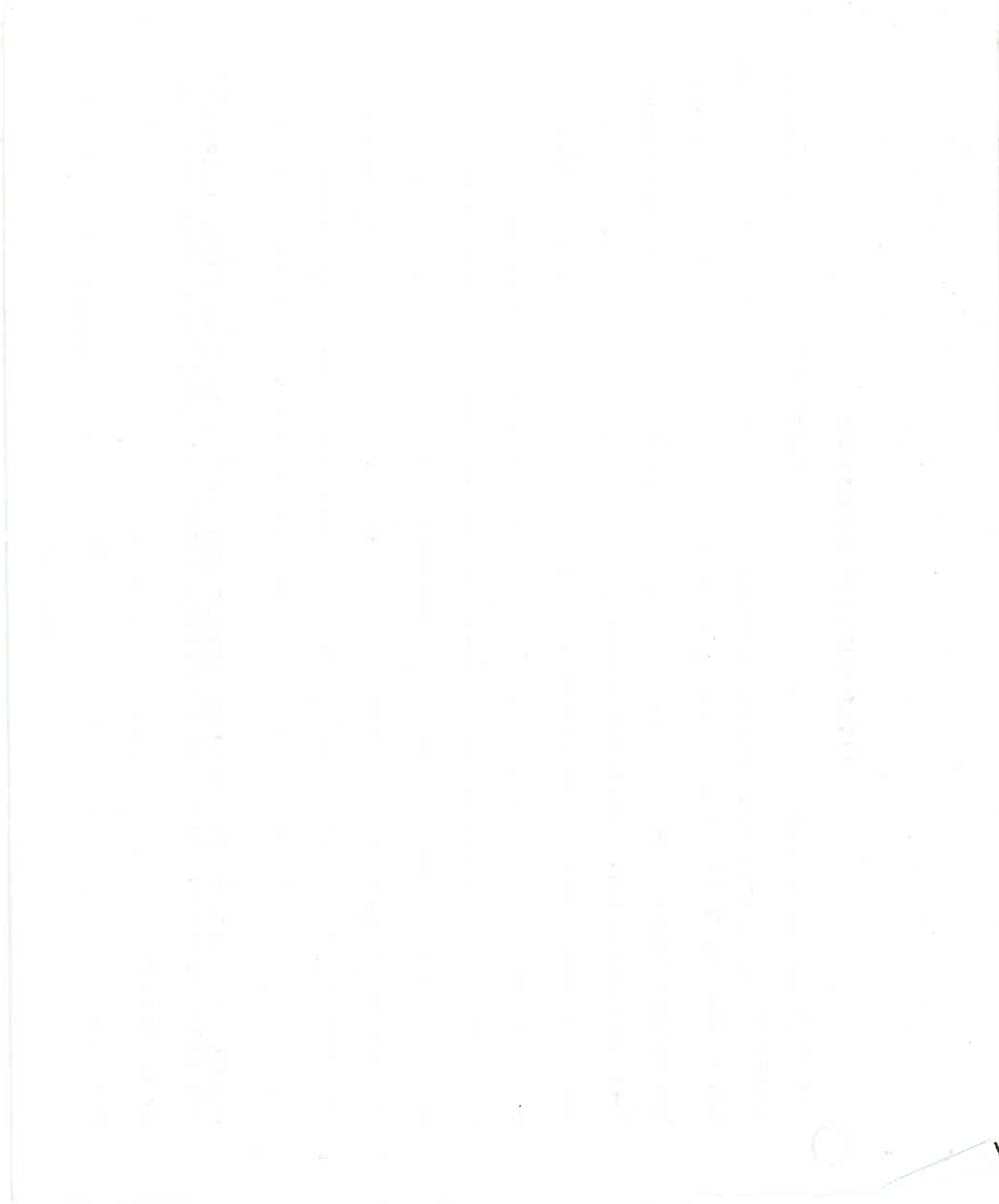
PLEASE CALL FOR INSPECTION WHEN CORRECTIONS HAVE BEEN COMPLETED. ACCEPTANCE AND APPROVAL BY AN INSPECTOR OF THIS DEPARTMENT IS REQUIRED AND MUST BE CORRECTED

ON OR BEFORE _____

DATE 9-26-86 BY 5

INSPECTOR _____

FIELD COPY



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 RIVIERA HEIGHTS - 2ND ADDITION Cost of project \$5,500.00
Owner's Name NANCY Jo BUCKHAM Address 60 SOLIETTE DR., NAPOLEON, OH.
Contractor GENE WAISNER Telephone No. 762-5093
Address Rt. 3, NAPOLEON, OHIO 43545

Lot Information: (Not required for siding job)

Lot No. 75 Subdivision RIVIERA HEIGHTS - 2ND ADDITION
Zoning District _____ Lot Size 78.89 ft. X 125 ft. Area 9861.25 sq. ft.
Setbacks: Front 25 ft Right Side 12.99 Left Side 20 Rear 43 5'

Work Information:

Residential Commercial _____ Industrial _____
New Construction _____ Addition Remodel _____
Accessory Building _____ Siding DOUGLAS FIR
(Specific Type)

Brief Description of Work: ----- SCREENED IN PORCH

Size: Length 21' Width 12' No. of Stories 1
Area: 1st Floor 252 sq. ft. Basement _____ sq. ft.
2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.
3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: _____

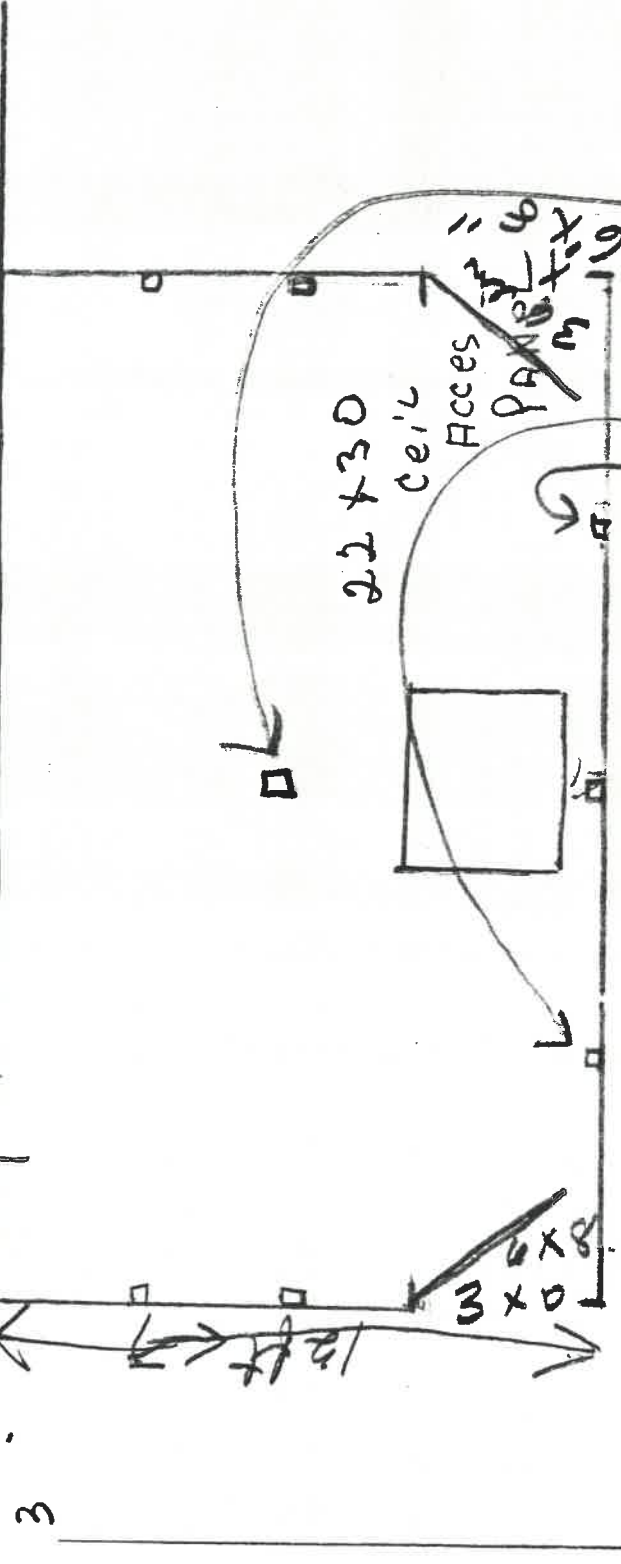
APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 9-3-86 Applicant's Signature Nancy Jo Buckham

PERMIT NO.

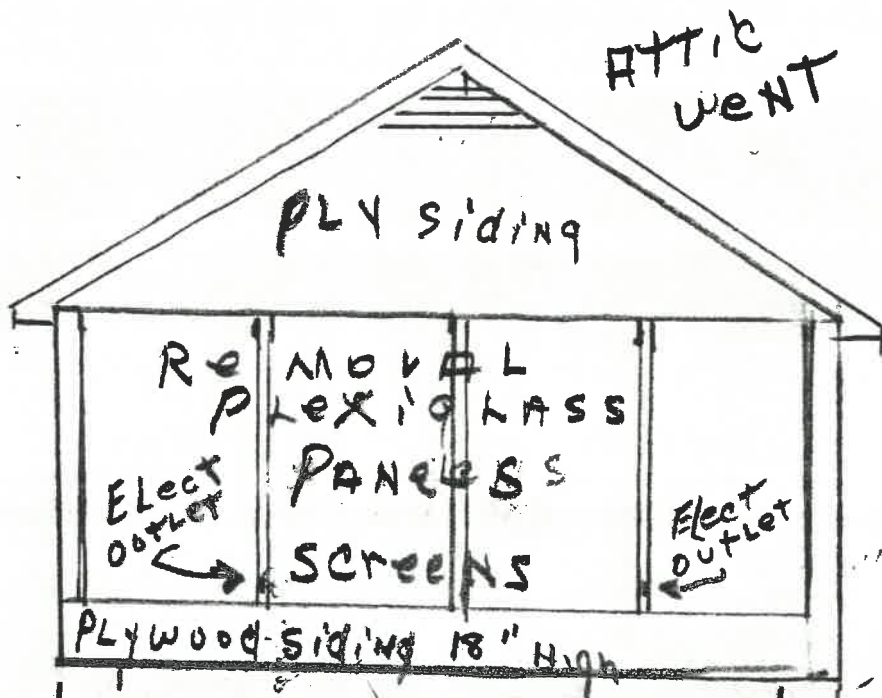
PERMIT FEE \$

Existing House



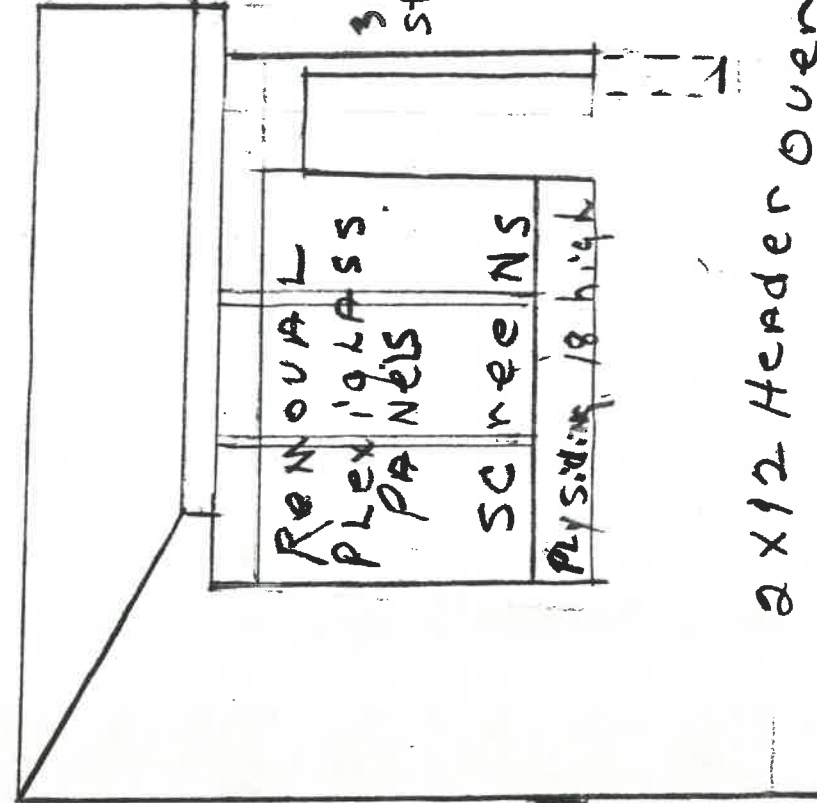
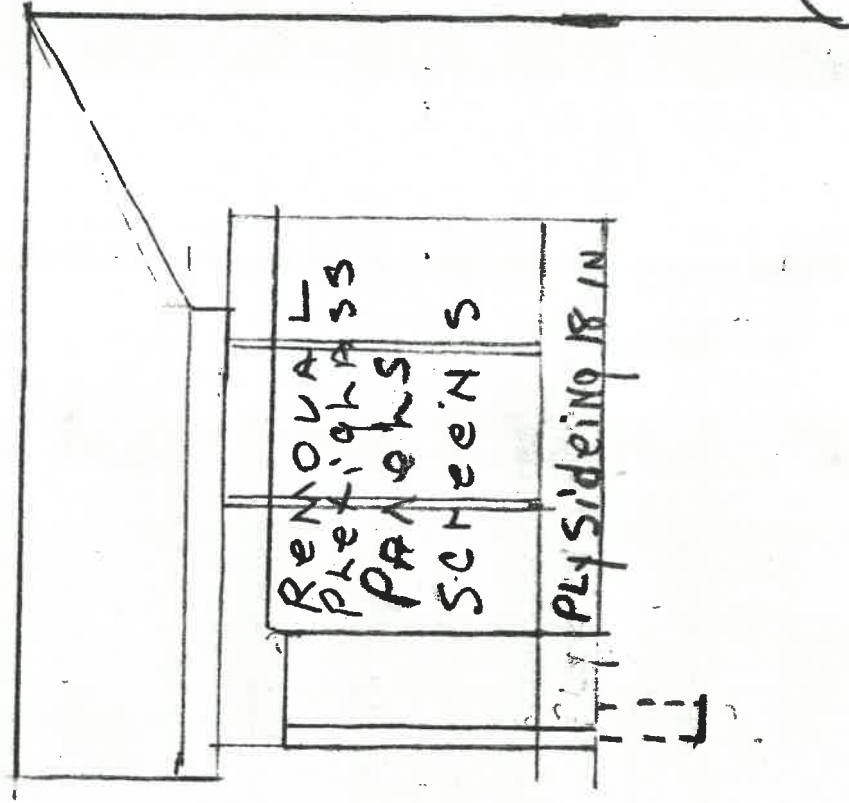
Electrical outlets
Center ceiling light





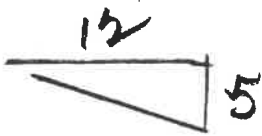
2x12 Header over
4x4 post with 2x4
trimmers
42" OC

Screened center
section

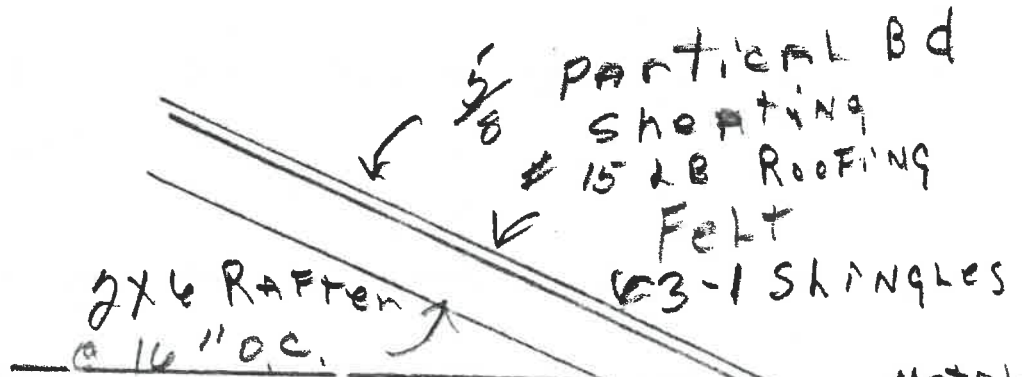


2x12 Header over
 4x4 Post with 2x4
 Trimmers 36 OC
 Screened
 Center section

Existing
 Building
 Wall



CEILING
FINISH
ALUM
SOFFIT



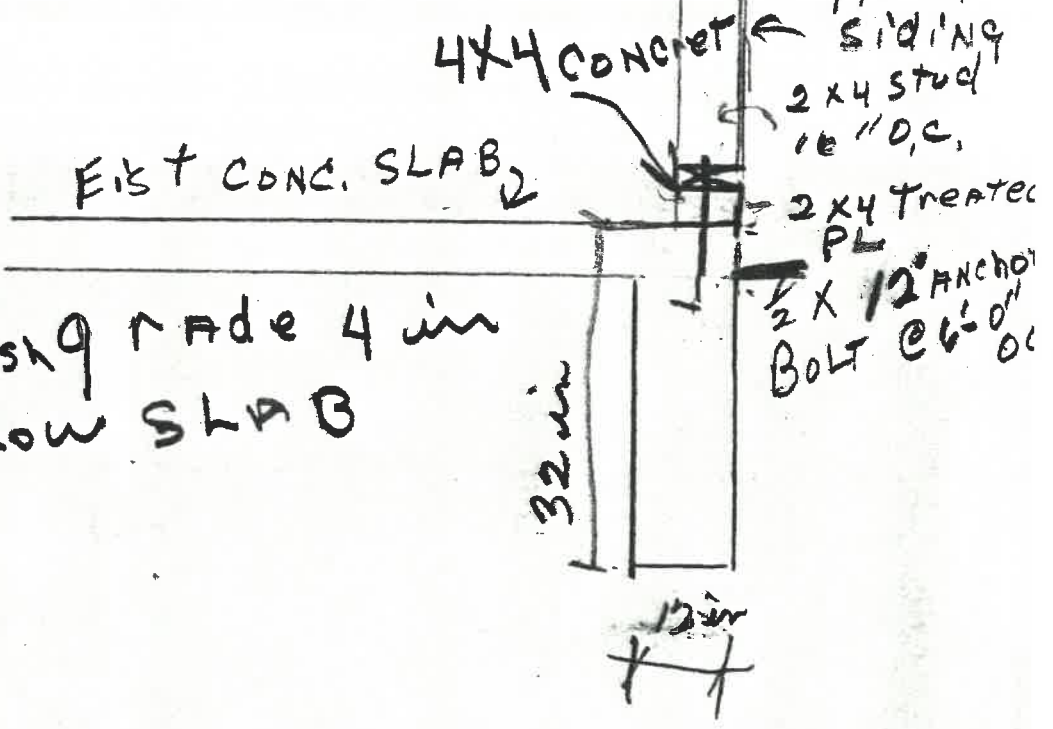
2x10 Ceil Joist
16" O.C. 2 = 2x12 Headers
YELLOW PINE

CEILING LIGHT
CENTERED

METAL DRIVE
2x6 FASCIA
ALUM COVER
SOFFIT W/ 16 in OVER HANG

INSIDE SIDE WALLS
7' 11" CEILING HEIGHT

PARTICLE BOARD
ON PLYWOOD



1/2 ASPENITE SHEATHING
FIR PLYWOOD

SIDING

FINISH MADE 4 in
BELOW SLAB

