

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 226 Date April 9, 1981
 Job Location 875 Kenilworth Valuation \$ 400.00
Address
 Owner Chuck Ross Address 875 Kenilworth
Name
 Contractor Chuck Ross Telephone No. 592-5393
 Address 875 Kenilworth, Napoleon, Ohio
 Electric Contractor _____
 Plumbing Contractor _____
 Mechanical Contractor _____

This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.

Work Information:

Residential Commercial _____ Industrial _____
No. dwelling units
 New Construction _____ Addition _____ Remodel
 Brief Description of Work Replacing old metal storage shed with new
wood frame shed, same size and location

ISSUED BY _____ DEPT. OF BUILDING & ZONING
Building Official

It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- _____ Footing excavation prior to placing concrete.
- _____ Footing drains and foundation prior to backfill.
- _____ Prepared sub-grade prior to placing concrete floor slab.
- _____ Sanitary sewer
- _____ Rough-in electrical, plumbing and service framing prior to installing wall board.
- _____ Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

PERMIT & FEES

Building Permit	\$ 3.00
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ 3.00
LESS FEES PAID	\$ -0-
BALANCE DUE	\$ 3.00

PAID
APR 9 1981
CITY OF NAPOLEON

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

CITY OF BATHON
 PLANNING AND ZONING DEPARTMENT
 PERMIT TO CONSTRUCT

The undersigned hereby certifies that the above information is true and correct, and that the applicant is the owner of the property described herein.

Location of job: 875 Hamelway Cost of job: 400.00
 Owner's Name: Chuck Ross Address: 875 Hamelway
 Contractor: Owner Telephone No.: 592-5393

Address: _____
 Lot Information (Not required for siding job):
 Lot No.: 109-110 Subdivision: Spangler Add.
 Block District: A Lot Size: 120 ft. x 129 ft. Area: _____ sq. ft.
 Proposed Use: _____ Front Side _____ Left Side _____ Rear _____
 Use Information:
 Residential _____ Commercial _____ Industrial _____
 New Construction _____ Addition _____ Remodel _____

Structure: Siding (Specific Type)
 Description of Work: Replacing old metal storage shed with new wood frame shed, same size & location
 Size: Length 12 ft. Width 8 ft. No. of Stories 1
 1st Floor _____ sq. ft. Elevation _____ sq. ft.
 2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.
 3rd Floor _____ sq. ft. Other _____ sq. ft.

3.00

Additional Information: _____

APPLICANTS FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETED SETS OF PLANS IN PEN OR INK. PLANS SHALL INCLUDE 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: 4-9-81 Applicant's Signature: Chuck Ross

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INSPECTION RECORD

UNDERGROUND		ROUGH-IN &			FINAL		
Type	Date	By	Type	Date	By	Date	
PLUMBING	Sewer Connection		Drainage, W. & Vent			Drainage, W. & Vent	
	Building Sewer		Water Piping			Water Heater	
	Water Piping		Condensate Lines			Backflow Prevention	
			Indirect Waste				
						FINAL APPROVAL	
ELECTRICAL	Floor Ducts Raceways		Rough Wiring			Electric Mtr. Clearance	
	Conduits & or Cable		Conduits/ Cable			Signs	
	Grounding & or Bonding		Service Panel Switchboard				
			Subpanels				
			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			FINAL APPROVAL	
MECHANICAL	Refrigerant Piping		Refrigerant Piping			Duct Insulation	
	Ducts/ Plenums		Ducts/ Plenums			Chimney(s)	
			Ventilation <input type="checkbox"/> Supply			Furnace(s)	
			<input type="checkbox"/> Exhst.			FINAL APPROVAL	
			Wall Construction			Fireplace Chimney	
BUILDING	Excavation		Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access	
	Footings & Reinforcing		Floor System(s)			Special Insp Reports Rec'd	
	Sub-soil Drain		Roof System			Smoke Detector	
	Foundation Walls		Fire Wall(s)			Demolition (sewer cap)	
	Floor Slab		Roof Cover Roof Drain			Building or Structure	
	FINAL APPROVAL BLDG. DEPT		—	Certificate of Occupancy Issued		#	

JRC 8-11-88