

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 01471 Issued 10-19-87
616 date

Job Location 626 Leonard

Lot 21 317 Sheffields 3rd Addition
FIRST address
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Robert Neuhauser
name

Address 517 Appian PO Box 700
tel.

Agent Sterling Services
builder-eng.-etc. tel.

Address 604 Euclid

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 12,500.00

| | FEES | BASE | PLUS | TOTAL |
|--|----------------|------|-------|-------|
| <input checked="" type="checkbox"/> BUILDING | | 6.00 | 39.75 | 45.75 |
| <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. copies | hrs | .50 | |
| | Elect. | hrs | | |
| TOTAL FEES..... | | | | 46.25 |
| LESS MIN. FEES PAID _____ | | | | |
| | | | | date |
| BALANCE DUE..... | | | | |

ZONING INFORMATION N.A.

| district | lot dimensions | area | front yd | side yds | rear yd |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| B | | | | | |
| 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: N.A. brief description

Plumbing: N.A. brief description

Mechanical: N.A. brief description

Sign: N.A. Dimensions Sign Area

Additional Information: Install a new roof including rafters and ceiling joists over the kitchen & dining area - 23' x 25' **PAID**

Date 10/21/87 Applicant Signature Robert Neuhauser **OCT 21 1987**
owner-agent

CITY OF NAPOLEON

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) | | | Exterior Wall Construction | | | Roof Covering Roof Drainage | | | Smoke Detector | | 6/15/54 |
| | 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. | | 6/15/54 |
| | | | | Roof System | | 11/3/54 | Special Insp Reports Rec'd | | | Certificate of Occupancy Issued | | |
| ADDITIONAL | INSPECTIONS, CORRECTIONS, ETC. | | | | | | INSPECTIONS, CORRECTIONS, ETC. | | | | | |
| | ADD COCAR TIPS TO COF RAFTER (PAU) | | | | | | 11/3/54 | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

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

ADDENDUM TO Permit No. 01471- (1)
 Owner ROBERT NEUNHAUSER
 Contractor STERLING SERVICES
 Location 626 LEDWARD

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

| 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. | Terminate all exhaust systems to outside air. |
| Provide approved sheathing or flashing behind masonry veneer. | Insulate ducts in unheated areas. |
| Provide min. 15# underlayment on roof. | Provide backflow prevention device on all hose bibs. |
| Provide adequate fireplace hearth. | 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 | Contact City Utilities Dept. to remove conductors and/or meter. |
| Provide mechanical exhaust or window in bathroom | Provide approved system of grounding and bonding. |
| <input checked="" type="checkbox"/> Provide min. <u>277</u> Sq. In. net free area attic ventilation. | ELECTRICAL |
| Provide min. _____ Sq. In. net free area crawl space ventilation. | Show location of service entrance panel and service equipment panel. |
| FOUNDATION | G. F. C. I. req'd. on temporary electric. |
| Min. depth of foundation below finished grade is 32". | Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I. |
| Min. size of footer _____ " x _____ " | Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits. |
| Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry. | Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits. |
| 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. |
| Show size of wood girder in _____ | Footers and Setbacks. _____ Building sewer. |
| Provide design data for structural member in _____ | Foundation. _____ HVAC rough-in. |
| Floor joists undersized in _____ | Plumbing rough-in. <input checked="" type="checkbox"/> Final Building |
| Provide double joists under parallel bearing partitions. | Plumbing final. _____ other, |
| Provide 1" x 4" let in corner bracing, approved sheathing, or equal. | Electrical service. <input checked="" type="checkbox"/> FRAMING (ROOF) |
| Show size of headers for openings over 4' wide _____ | Electrical rough-in. _____ |
| | Electrical final _____ |

Additional Corrections. ATTACH THE STUD WALL TO THE TOP OF THE EXISTING WALL TO PROVIDE A RIGID ASSEMBLY TO SUPPORT THE NEW RAFTERS AND CEILING JOISTS

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. 01471 and made a part thereof. DATE APPROVED OR DISAPPROVED 10-16-82 Checked by ELDON HUBER
 Plan Examiner.
 DATE RECHECKED AND APPROVED _____ Checked by _____

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01471 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. Issued 10-16-87
date
 Job Location 626 LEONARD
address
 Lot 21 SHEFFIELDS 3RD ADD
sub-div or legal discript
 Issued By 54
building official
 Owner ROBERT NEUHAESE
name tel.
 Address 517 ADRIAN
 Agent STERLING SERVICES
builder-eng.-etc. tel.
 Address 604 EULLID
 Description of Use RESIDENCE
 Residential 1
no. dwelling units
 Commercial Industrial
 New Add'n. Alter Remodel X
 Mixed Occupancy
 Change of Occupancy
 Estimated Cost \$ 12,500.00

| FEE | BASE | PLUS | TOTAL |
|--|---|-------|--------------|
| <input checked="" type="checkbox"/> BUILDING | 6.00 | 39.75 | 45.75 |
| <input type="checkbox"/> ELECTRICAL | | | |
| <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. ELECT. | | | |
| ADDITIONAL PLAN REVIEW | (copy) Struct. <u> </u> hrs <u>150</u> | | |
| | Elect. <u> </u> hrs <u>46.25</u> | | |
| TOTAL FEES..... | | | <u>81.75</u> |
| LESS MIN. FEES PAID <u> </u> date <u> </u> | | | |
| BALANCE DUE..... | | | |

ZONING INFORMATION N.A.

| district | lot dimensions | area | front yd | side yds | rear yd |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| <u>B</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: N.A. brief description
 Plumbing: N.A. brief description
 Mechanical: N.A. brief description
 Sign: N.A. type Dimensions Sign Area

Additional Information: REINSTALL A NEW ROOF INCLUDING RAFTERS
ADD CEILING JOISTS OVER THE KITCHEN + DINING
AREA ~~23' x 25'~~ ~~23' x 25'~~ 23' x 25'
 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 ⁶¹⁶ ~~626~~ Lenard Cost of project 12,500⁰⁰

Owner's Name Robert Neuhauser Address 517 Appain St Nap.

Contractor Staling Service Telephone No. 592-0837

Address 604 Euclid Nap Ohio

Lot Information: (Not required for siding job)

Lot No. ²¹ ~~#12~~ Subdivision Sheffield 3rd addition ^{FIRST}

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

Setbacks: Front Right Side Left Side Rear

Work Information:

Residential Commercial Industrial

New Construction Addition Remodel

Accessory Building Siding

Brief Description of Work:----- Changing roof line and (Specific Type)

remodeling interior

Size: Length 23' Width 25' No. of Stories 1

Area: 1st Floor 1064 sq. ft. Basement sq. ft.

2nd Floor N/A sq. ft. Accessory Bldg. sq. ft.

3rd Floor N/A sq. ft. Other sq. ft.

Additional Information: Just rise roof over living room

+ pitch in + dining room and rise ceiling in kit + dining room

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 10/15/87 Applicant's Signature Paul S. Adams

PERMIT NO.

PERMIT FEE \$

old roof rafters are going to remain over living room

ROOFING FINISH

15th felt / Over Corners Shingles *1/2" PLYWOOD*

ROOF PITCH

6/12

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

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

FINISH CEILING *dry wall*

WALL STUDS
2x4
at 16" o.c.

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

ROOF SHEATHING
1/2 plywood
SOFFIT
aluminum

EXTERIOR WALL FINISH

vinyl siding

INTERIOR WALL FINISH

paneling

WALL SHEATHING

ply wood

FLOOR FINISH

linoleum

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

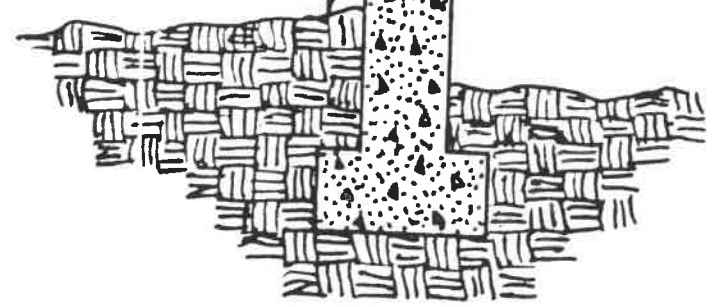
FLOOR JOISTS

size same
at _____ o.c.

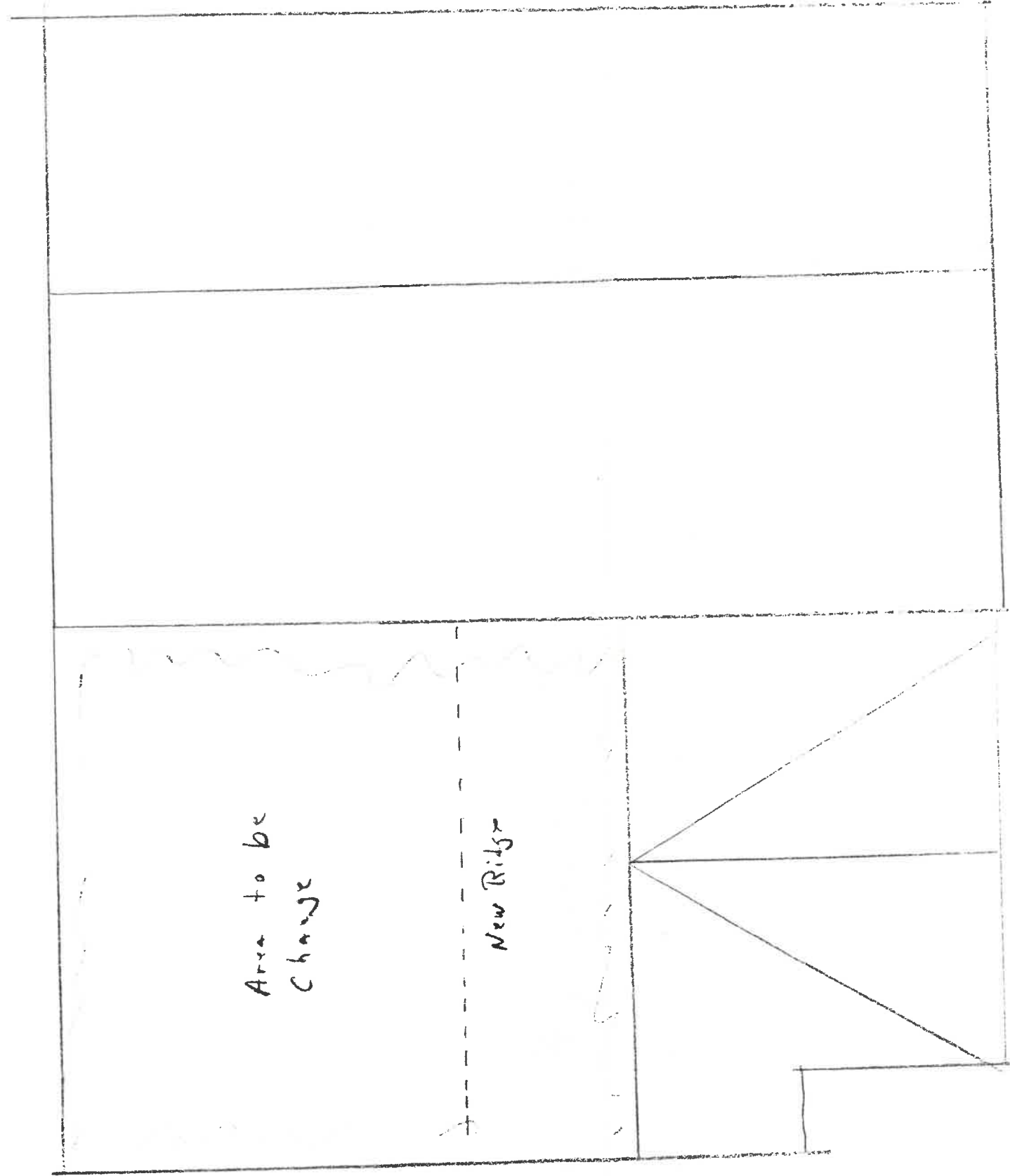
FOUNDATION WALL
thickness same
depth _____

FOOTER
width same
depth _____

Top of foundation
to grade - 8" min.



↑ N



Robert Neuhäuser

10/5/97

F.P.S. RAFTERS + CEIL 101177

