

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

Permit No. 2894 Issued 4-28-93
 Job Location 960 Lynne Avenue
 Lot _____
 Issued by Brent N. Damman
 Owner Kim Solis 592-5719
 Address 960 Lynne Ave., Napoleon, Ohio
 Agent Self
 Address _____
 Use Type - Residential xxx
 Other - Describe _____
 No. Dwelling Units 1
 New _____ Replacement _____
 Add'n. xxx Alter _____ Remodel _____
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 1,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> Building	\$ 9.00	\$ 9.00	\$ 18.00
<input type="checkbox"/> Electrical	\$	\$	\$
<input type="checkbox"/> Plumbing	\$	\$	\$
<input type="checkbox"/> Mechanical	\$	\$	\$
<input type="checkbox"/> Demolition	\$	\$	\$
<input type="checkbox"/> Zoning	\$	\$	\$
<input type="checkbox"/> Sign	\$	\$	\$
<input type="checkbox"/> Water Tap	\$	\$	\$
<input type="checkbox"/> Sew. Insp.	\$	\$	\$
<input type="checkbox"/> Sewer Tap	\$	\$	\$
<input type="checkbox"/> Temp. Water	\$	\$	\$
<input type="checkbox"/> Temp. Elec.	\$	\$	\$
TOTAL FEES.....			\$ 18.00
LESS FEES PAID... (4-28-93)...			\$ 18.00
BALANCE DUE.....			\$ 0.00

ZONING INFORMATION

district	lot dimensions		area	front yd	side yd	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr	

WORK INFORMATION

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for Demo. Permit) _____

Electrical: _____
 Plumbing: _____
 Mechanical: _____

Additional Information: 16' x 16' deck addition to back of house

Date 4-28-93 Applicant Signature Kim Solis

PAID
APR 28 1993
 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		
	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		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					

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 8379A
 CITY OF HONOLULU

APPLICATION FOR

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FROM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. _____		<u>Base</u>	<u>Plus</u>	<u>Total</u>
PERMIT NO. <u>2894</u> ISSUED <u>4-28-93</u>	(-) Building	\$ <u>18.00</u>	\$ _____	\$ <u>18.00</u>
JOB LOCATION <u>960 Lyane Ave</u>	() Electrical	\$ _____	\$ _____	\$ _____
LOT _____ (Subdivision or Legal Description)	() Plumbing	\$ _____	\$ _____	\$ _____
ISSUED BY <u>BND</u> (Building Official)	() Mechanical	\$ _____	\$ _____	\$ _____
OWNER <u>Kim Solis</u> PHONE <u>592-5719</u>	() Demolition	\$ _____	\$ _____	\$ _____
ADDRESS <u>960 Lyane Ave</u>	() Zoning	\$ _____	\$ _____	\$ _____
AGENT <u>Self</u> PHONE <u>Same</u>	() Sign	\$ _____	\$ _____	\$ _____
ADDRESS <u>Same</u>	() Water Tap	\$ _____	\$ _____	\$ _____
USE: (✓) Residential () Commercial () Industrial	() Sewer Tap	\$ _____	\$ _____	\$ _____
() Other _____	() Temp Water	\$ _____	\$ _____	\$ _____
WORK: () New (✓) Addition () Replacement () Remodel	() Temp Elec.	\$ _____	\$ _____	\$ _____
ESTIMATED COST = \$ <u>1000.00</u>	Additional - Structure _____ Hours _____			
	Plan Review: Electric _____ Hours _____			

TOTAL FEES \$ 18.00
 Less Fees Paid \$ 18.00
 BALANCE DUE \$ 0.00

ZONING INFORMATION

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard

Max Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition or Appeal Required-Date

WORK INFORMATION

Building: Ground Floor Area _____ sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.
 Size: Length _____ Width _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: Adding a 16ft x 16ft deck of
of back of House.

ELECTRICAL: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: () New () Service Change () Rewiring () Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes () No
Size of Service _____ Underground _____ Overhead _____ Number of New Circuits _____

Description of Work: _____

PLUMBING: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

WATER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Water Dist. Pipe _____

SANITARY SEWER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____

STREET SEWER TAP REQUIRED - () Yes () No Type of Pipe _____ STREET TO BE OPENED - () Yes () No
Main Building Drain Size = _____ Main Vent Pipe Size = _____

LIST NUMBER OF PLUMBING FIXTURES BELOW:

Water Closets = _____ Bathtubs = _____ Showers = _____ Lavatories = _____ Kitchen Sinks = _____ Disposal = _____
Clothes Washer = _____ Floor Drains = _____ Dishwasher = _____ Other _____ Total = _____

Description of Work: _____

MECHANICAL: Contractor _____ Phone _____
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 _____

NUMBER OF HEAT ZONES = _____ HOT WATER - () One (1) Pipe () Two (2) Pipes () Series Loop

ELECTRIC HEAT - Number of Circuits _____ Number of Furnaces _____ Number of Hot Air Runs _____

Number of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____

LOCATION OF HEATING UNITS - () Crawl Space () Floor Level () Attic () Suspended () Roof () Outside

Description of Work: _____

DRAWINGS REQUIRED: All applications must be accompanied by two (2) complete sets of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall be drawn to scale, show all existing structure on the Site Plans, and 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 Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

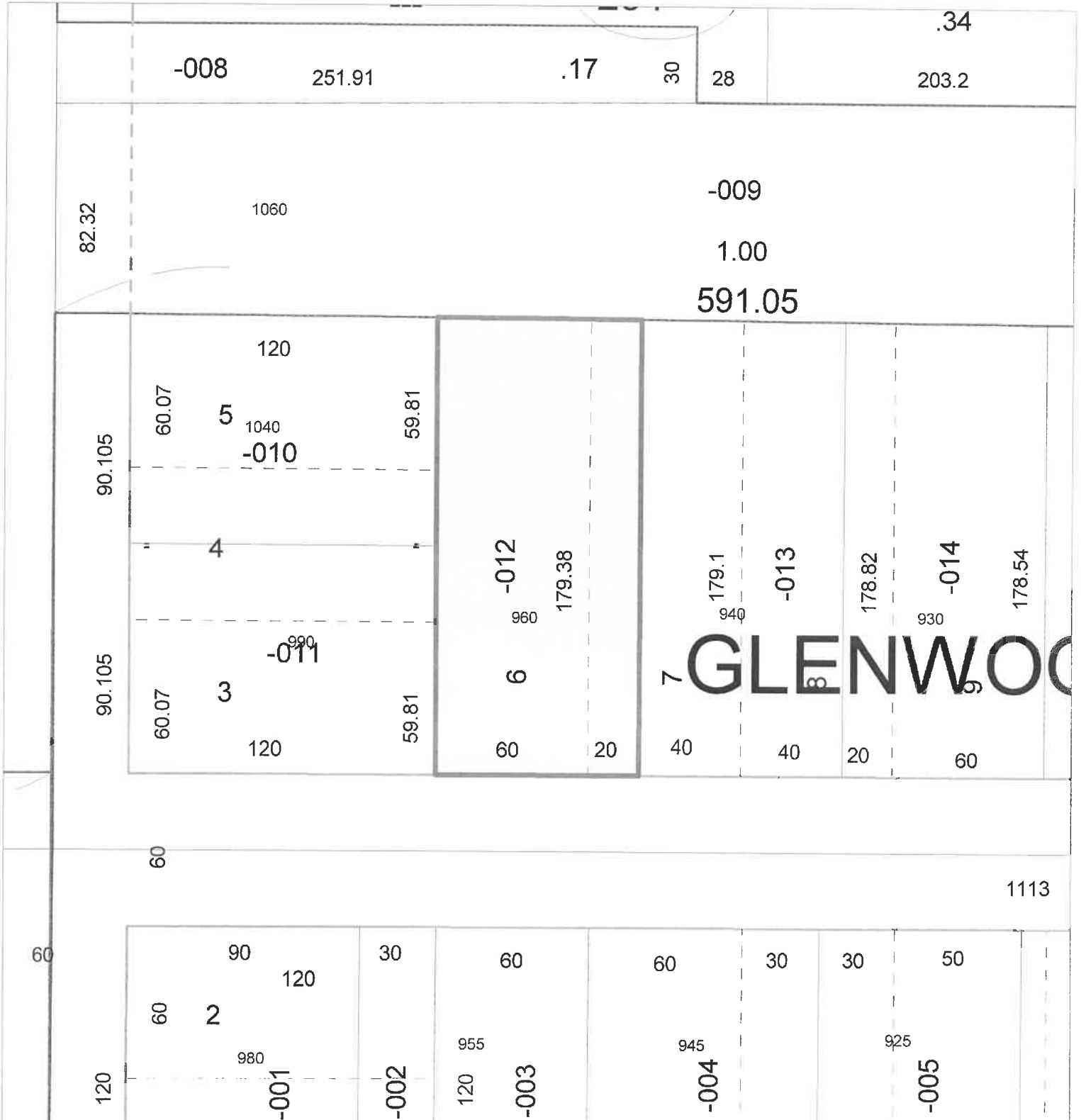
Signature of Applicant _____ **Date** _____

Henry County GIS

PUBLIC ACCESS SYSTEM

Date: June 29 2001

This map was prepared as the tax map for Henry County as prepared by the Henry County Engineer in accordance with Section 5713.09 of the Ohio Revised Code. Henry County assumes no legal responsibility for the information contained on this map. Users noting errors or omissions are encouraged to contact the Henry County Tax Map Department.



Map #: 05-14-254-012
 Parcel #: 410091840100
 Owner: SOLIS, KIMBERLY J.

Address: 960 LYNNE AVE
 NAPOLEON OH 43545

Acres: 0.00000
 Tax District: 41
 Location: 960 LYNNE AVE
 Parc Suf: 01
 Deed: V 248P 714

Legal Line 1: LOT 6 GLENWOOD ADDITION Building Taxes: 19640
 Legal Line 2: AND W 1/3 LOT 7 Land Taxes: 6100
 Legal Line 3: Total Taxes: 25740
 Frontage: 000000 Cauv Value:
 Depth: 0179



Please file

