

PERMIT

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

Permit No. 770 Date Feb. 13, 1984

Job Location 503 E. Main Valuation \$ _____
Address

Owner Carolyn Snyder Address 191 Hudson
Name

Contractor " " Telephone No. _____
 Address 191 Hudson, 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 Remove or demolish 3 family residence

ISSUED BY Richard A. Hayman 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 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.

PERMIT & FEES

Building Permit	\$ 10.00
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ 10.00
LESS FEES PAID	\$ -0-
BALANCE DUE	\$ 10.00

PAID
MARCH 23
1984

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AID
MARCH 10 1984

INSPECTION RECORD

UNDERGROUND		ROUGH-IN & FINAL			
Type	Date	By	Type	Date	By
PLUMBING	Sewer Connection		Drainage, W. & Vent		
	Building Sewer		Water Piping		
	Water Piping		Condensate Lines		
			Indirect Waste		
ELECTRICAL	Floor Ducts Raceways		Rough Wiring		
	Conduits & or Cable		Conduits/Cable		
	Grounding & or Bonding		Service Panel Switchboard		
			Subpanels		
MECHANICAL	Refrigerant Piping		<input type="checkbox"/> Range <input type="checkbox"/> Dryer		
	Ducts/Plenums		Refrigerant Piping		
			Ducts/Plenums		
			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.		
BUILDING	Location, Set-backs, Esmt(s)		Wall Construction		
	Excavation		Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access		
	Footings & Reinforcing		Floor System(s)		
	Sub-soil Drain		Roof System		
Foundation Walls		Fire Wall(s)			
Floor Slab		Roof Cover Roof Drain			
FINAL APPROVAL BLDG. DEPT.			Certificate of Occupancy Issued		#

[Signature]

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 503 E. MAIN Cost of project _____

Owner's Name Carolyn Snyder Address 191 Hudson

Contractor Owner Telephone No. _____

Address _____

Lot Information: (Not required for siding job)

Lot No. 21 Subdivision BK Scott 1st add

Zoning District FP 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: ----- Removal or Demolish (Specific Type)

3 Family Residence

Size: Length _____ Width _____ No. of Stories _____

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: _____

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 _____ Applicant's Signature _____

PERMIT NO. 770
PERMIT FEE \$ 10.00

