

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. _____

PERMIT NO. 4040 ISSUED 9-3-96

JOB LOCATION 331 W. Main

LOT _____
 (Subdivision or Legal Description)

ISSUED BY BND
 (Building Official)

Rex Walker
 OWNER PHONE 592-6015

ADDRESS 857 Strong St Nap

AGENT Sam PHONE _____

ADDRESS _____

USE: Residential () Commercial () Industrial
 Other _____

WORK: () New Addition () Replacement () Remodel

ESTIMATED COST = \$ _____

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
() Building	\$ _____	\$ _____	\$ _____
() Electrical	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Plumbing	\$ <u>9.00</u>	\$ _____	\$ <u>9.00</u>
() Mechanical	\$ _____	\$ _____	\$ _____
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
() Water Tap	\$ _____	\$ _____	\$ _____
() Sewer Tap	\$ _____	\$ _____	\$ _____
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Plan Review: Structure _____ Hours _____
 Electric _____ Hours _____

TOTAL FEES \$ 9.00
 Less Fees Paid \$ 9.00
 BALANCE DUE \$ -0-

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

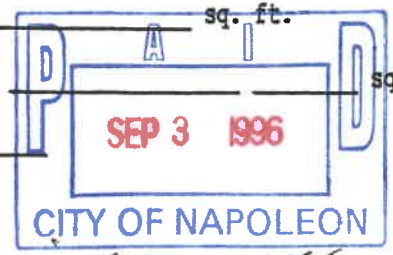
WORK INFORMATION

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: add water meter yoke to existing water service line from Main

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 Napoleón Engineering Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

Signature of Applicant _____ Date _____

METER YOKE RELEASE

This document is for the release of one (1) Water Meter Yoke for Residential water service lines.

RELEASE NO. 217
PERMIT NO. 4040 ISSUED 9-3-96
JOB LOCATION 331 W. Main
() - Inside City Limits () - Outside City Limits
ISSUED BY BND
OWNER Rex Walker
ADDRESS 857 Strong St. Nap.
CONTRACTOR Same
ADDRESS _____
CONTRACTOR'S PHONE NO. _____

WATER TAP SIZE: () = 1" () = 1-1/2" () = 2"
WATER METER s# _____

() - New Dwelling () - Existing Dwelling
() - Lawn Meter

5/8 Yoke

Water Service Line to be Type (K) Copper or (CTS) Polyethelene Tubing of one inch (1") minimum.

~~Watts No. 7 Dual check required () = Yes () = No~~

Water Meter Yoke installation is subject to the following conditions:

- 1.) Must be located in an accessible area.
- 2.) Must be in an area not subject to freezing temperatures.
- 3.) Must be eighteen inches (18") above floor level, **not in crawl spaces.**
- 4.) Must comply with the mounting criteria and clearances as set forth in **DRAWING #04403901.**

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ISSUED BY BND

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CONTRACTOR Sam

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