

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

Permit No. 3181 Issued 4-27-94  
 Job Location 915 W. Main  
 Lot \_\_\_\_\_  
 Issued by Brent N. Damman  
 Owner Steve Panning 592-0050  
 Address 419 S. Perry  
 Agent Von deylon Plumbing and Heating  
 Address 116 E. Clinton 592-4756  
 Use Type - Residential X  
 Other - Describe \_\_\_\_\_  
 No. Dwelling Units \_\_\_\_\_  
 New Replacement X  
 Add'n. Alter Remodel  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 1600.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mechanical	\$ <u>18.00</u>	\$ _____	\$ <u>18.00</u>
<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.....			\$ <u>18.00</u>
LESS FEES PAID.....			\$ <u>18.00</u>
BALANCE DUE.....			\$ <u>0.00</u>

**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 **PAID**  
 Height \_\_\_\_\_ Building Volume (for Demo. Permit) \_\_\_\_\_  
 Electrical: \_\_\_\_\_  
 Plumbing: \_\_\_\_\_  
 Mechanical: \_\_\_\_\_  
 Additional Information: Central Air  
 Date \_\_\_\_\_ Applicant Signature Robert D. Meyer

APR 27 1994  
 CITY OF NAPOLEON



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 \_\_\_\_\_



**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. 3181 ISSUED 4-27-94

JOB LOCATION 915 W. Main

LOT \_\_\_\_\_  
 (Subdivision or Legal Description)

ISSUED BY BND  
 (Building Official)

OWNER Steve Panning PHONE 592-0050

ADDRESS 419 S. Perry Napoleon

AGENT Van Deyken P&H PHONE 592-4756

ADDRESS 116 E. Clinton

USE:  Residential  Commercial  Industrial  
 Other \_\_\_\_\_

WORK:  New  Addition  Replacement  Remodel

ESTIMATED COST = \$ 1600.00

( ) Building	\$ _____	\$ _____	\$ _____
( ) Electrical	\$ _____	\$ _____	\$ _____
( ) Plumbing	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Mechanical	\$ <u>18.00</u>	\$ _____	\$ <u>18.00</u>
( ) Demolition	\$ _____	\$ _____	\$ _____
( ) Zoning	\$ _____	\$ _____	\$ _____
( ) Sign	\$ _____	\$ _____	\$ _____
( ) Water Tap	\$ _____	\$ _____	\$ _____
( ) Sewer Tap	\$ _____	\$ _____	\$ _____
( ) Temp Water	\$ _____	\$ _____	\$ _____
( ) Temp Elec.	\$ _____	\$ _____	\$ _____

Additional Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
 Electric \_\_\_\_\_ Hours \_\_\_\_\_

TOTAL FEES . . . . . \$ 18.00  
 Less Fees Paid . . . . . \$ 18.00  
 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

**PAID**  
 APR 27 1994

CITY OF NAPOLEON

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: Width \_\_\_\_\_ Length \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: Central Air