## PERMIT

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

| Permit No. 2965 Issued 7-7-93                                 | FEES                                  | was BASE                 |            |               |
|---|---------------------------------------|--------------------------|------------|---------------|
| Job Location 641 WEST MAIN                                    |                                       |                          |            | 3191952       |
| Lotets.mat.ncs  |                                       |                          |            | \$            |
| Issued by BRENT N. DAMMAN                                     | 4                                     | DIMORS                   |            | \$            |
| Owner LARRY IRVING III 599-3928                               |                                       |                          |            | \$10000       |
| Address 641 WEST MAIN, NAPOLEON, OH                           |                                       |                          |            | \$\$          |
| Agent SELF MANA MANA  | i i i i i i i i i i i i i i i i i i i | (10)(4)9                 |            | gnigisti .    |
| Address managed more reported                                 |                                       | Primade(s)               |            | \$ atoug      |
| Use Type - Residential XX                                     | ,                                     |                          |            | \$ \$         |
|   | []Sew. Insp.                          |                          |            | \$            |
| No. Dwelling Units 1  | C2161                                 | MA - SESSESSION INTO THE |            | \$            |
| NewReplacement  |                                       |                          |            | 90043-10      |
| Add'n. XX Alter Remodel Remodel                               |                                       |                          | \$         | en \$1 social |
| 1001097   | TOTAL FE                              | 1 Switchbollt            |            | PORTUGE THE T |
| Change of Occupancy and Page 1                                | LESS FEE                              |                          |            | Mulding III   |
| Estimated Cost \$ 400.00                                      |                                       |                          |            | \$_0.00       |
| ZONING INFORMATION  |                                       |                          |            | Excavation    |
| district lot dimensions and other a                           |                                       | yd ¦ s                   | ide yd     | rear yd       |
| max hgt no pkg spaces no ldg spaces                           | : max cover                           | petition or appe         | al req'd   | date appr     |
| VORK INFORMATION  |                                       | & Emmilian               |            | O Slate       |
| Size: LengthWidths  |                                       |                          | i Floor    | Area          |
| HeightBuilding Volume   |                                       | rmit)                    | PAT        | C-16          |
| NEPECTIONS, CORRECTIONS, ETC. Plumbing:                       | ECTIONS, HTC                          | онь, сояві               | JUL 07     | 1993          |
| Mechanical:   |                                       | (                        | CITY OF NA | POLEON        |
| dditional Information: 10' x 22' R                            | ZAR DECK                              |                          |            | 9             |
|   | TIM DECK                              |                          |            | 0             |
| ate 7-7-93 Applicant Signature                                | 10th                                  |                          |            | 7             |
| White-Building Department Yellow-Applicant Pink-Electrical, I | nspector Green-Cle                    | erk-Treasurer            | Gold-Count | n Audita-     |

Green-Clerk-Treasurer Gold-County Auditor

## INSPECTION RECORD

|            | UNDERGROUND ROUG                  |           |    |                                  | 3H-IN |      |                                | FINAL |                  |                                  |      |    |
|------------|-----------------------------------|-----------|----|----------------------------------|-------|------|--------------------------------|-------|------------------|----------------------------------|------|----|
|            | Туре                              | Date      | Ву | Type                             | Date  | Ву   | Туре                           | Date  | Ву               | Туре                             | Date | Ву |
|            | Building<br>Drains                |           | ·  | Drainage, Waste<br>& Vent Piping |       |      | Indirect<br>Waste              |       |                  | Drainage, Waste<br>& Vent Piping |      |    |
| <u>5</u>   | Water<br>Piping                   |           |    |                                  |       |      |                                |       |                  | Backflow<br>Prevention           |      |    |
| FLUMBING   | Building<br>Sewer                 |           |    | Water<br>Piping                  |       |      | Condensate<br>Lines            |       |                  | Water<br>Heater                  | _    |    |
| <b>T</b>   | Sewer<br>Connection               |           |    |                                  |       |      |                                |       |                  | FINAL<br>APPROVAL                |      |    |
|            | Refrigerant<br>Piping             |           |    | Refrigerant<br>Piping            |       | 1    | Chimney(s)                     |       |                  | Grease Exhaust<br>System         |      |    |
| Ä          |                                   |           |    | Duct<br>Furnace(s)               |       |      | Fire<br>Dampers                |       |                  | Air Cond.<br>Unit(s)             |      |    |
| MECHANICAL | Ducts/<br>Plenums                 |           |    | Ducts/<br>Plenums                |       |      | ☐ Radiant Htr(s)☐ Unit Htr(s)  |       |                  | Refrigeration<br>Equipment       |      |    |
| ECH        | Fieligina                         |           |    | Duct<br>Insulation               |       |      | Pool<br>Heater                 |       |                  | Furnace(s)                       |      |    |
| Σ          |                                   |           |    | Combustion<br>Products Vents     |       | DB1  | Ventilation  Supply Exhst.     |       |                  | FINAL<br>APPROVAL                |      |    |
|            | Conduits & or Cable               |           |    | Conduits/<br>Cable               |       |      | □ Range<br>□ Dryer             |       |                  | Temp Service<br>Temp Lighting    |      |    |
| 4          | Grounding & or Bonding            |           |    | Rough<br>Wiring                  |       |      | ☐ Generator(s)<br>☐ Motors     |       |                  | Fixtures<br>Lampholders          |      |    |
|            | Floor Ducts<br>Raceways           |           |    | Service Panel<br>Switchboard     |       |      | □ Water Htr<br>□ Welder        |       |                  | Signs                            |      |    |
| ELECTRICAL | Service<br>Conduit                |           |    | Busways<br>Ducts                 |       |      | ☐ Heaters<br>☐ Heat Cable      |       |                  | Electric Mtr.<br>Clearance       |      |    |
| Ш          | Temporary<br>Power Pole           |           |    | Subpanels                        |       |      | □ Duct Htr(s) □ Furnace(s)     |       |                  | FINAL<br>APPROVAL                |      |    |
|            | Location, Set-<br>backs, Esmt(s)  | \$ 0 male |    | Exterior Wall<br>Construction    |       |      | Roof Covering<br>Roof Drainage |       |                  | Smoke<br>Detector                |      |    |
|            | Excavation                        |           |    |                                  |       |      | Exterior<br>Lath               |       |                  | Demolition<br>(sewer cap)        |      |    |
|            | Footings & Reinforcing            |           |    |                                  |       |      | □ Interior Lath □ Wallboard    |       |                  |                                  |      |    |
| 5<br>N     | Floor                             |           |    | Interior Wall-<br>Construction   |       |      | Fire<br>Wall(s)                |       |                  | Building or<br>Structure         | 1/4  | 80 |
| BUILDING   | Foundation<br>Walls               |           |    | Columns &<br>Supports            |       |      | Fireplace<br>Chimney           |       |                  | 7 77 45                          | 1    |    |
| Φ          | Sub-soil<br>Drain                 |           |    | Crawl Space ☐ Vent ☐ Access      |       |      | Attic                          |       |                  |                                  |      |    |
|            | Piles                             |           |    | Floor<br>System(s)               |       |      |                                |       |                  | FINAL APPROVAL<br>BLDG. DEPT.    |      | _  |
|            | d                                 | 149       | 1  | Roof<br>System                   |       |      | Special Insp<br>Reports Rec'd  |       |                  | Certificate of Occupancy Issued  |      |    |
| 200        | THE THIS PERTIONS, CORRECTIONS, E |           |    | ONS, E                           | TC.   | INSP | ECTI                           | ONS   | , CORRECTIONS, I | ETC.                             |      |    |
| ADDITIONAL | CITA OF NYEOTEON                  |           |    |                                  |       |      |                                |       |                  |                                  |      | -  |
|            |                                   |           |    |                                  |       | -    |                                |       |                  |                                  |      | -  |
| ADI        |                                   |           |    |                                  |       | +    |                                |       |                  |                                  |      | di |
|            |                                   |           | -  |                                  | -     | -    | 1. 100 141                     |       |                  |                                  |      |    |

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

| PERMIT NO. 2965   ISSUED   7 7 7 3   ()   Building   \$ 700   \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$  |   |                            |                       | ( 110) 002 401 | •  |
|--|---|----------------------------|-----------------------|----------------|--|
| Description   Commercial   Description   District   Lot Dimensions   Area   Front Yard   Side Yard   Required-Date   | ENTRY NO  |                            | Base                  | Plus           | Total  |
| Secretarial    | PERMIT NO. 2965 ISSUED 7-7-73                               | (X)Building                | \$ 9.00               |                |  |
| Community   Comm | JOB LOCATION 641 W. Main                                    |                            |                       |                | - · <u>- · · · · · · · · · · · · · · · · ·</u> |
| Subdivision or Legal Description   Subdivision or Legal Description   Subdivision or Legal Description   Subdivision of Legal Description   Subdivision    | LOT   | ( )Plumbing                | \$                    | s .            | - ·  |
| (Building Official)   ()Demolition   S   | $\mathcal{D} \leftarrow \mathcal{O}$                        |                            | S                     |                |  |
| PHONE  |   |                            | •                     |                | - *  |
| ADDRESS  |   |                            | *                     | •              | - \$   |
|  |   |                            | \$                    | . \$<br>\$     | _  |
| ( )   Sewer Tap   S   S   S   S   S   S   S   S   S  | IGENTPHONE  | ( )Water Tap               | \$                    | \$             | S  |
| ( ) Other  | DDRESS  | ( )Sewer Tap               | \$                    | \$             | \$   |
| Additional Structure Hours  Flan Review: Electric Hours  TOTAL FEES.  Less Fees Paid   | SE: (*) Residential ( ) Commercial ( ) Industrial ( ) Other | ( )Temp Water              | \$                    | \$             | \$   |
| Additional Structure Hours Plan Review: Electric Hours TOTAL FEES  | ORK: ( ) New ( Addition ( ) Replacement ( ) Remode)         | ( )Temp Elec.              | \$                    | \$             | \$   |
| TOTAL FEES   | STIMATED COST = \$  | Additional<br>Plan Review: | Structure<br>Electric | Hours          |  |
| Max Height No. Pkg. Spaces No. Ldg. Spaces Max Cover Petition or Appeal Required-Date  ORK INFORMATION  Tilding: Ground Floor Area sq. ft. Basement Floor Area sq. ft.  Trage Floor Area sq. ft. 2nd Floor Area sq. ft. Other sq. ft.  Ze: Width Length Stories Height  Tilding Volume (for Demolition Permit) cubic feet  | ONTING INCODUATION  | re22 Les:                  | raid                  |                | \$ 9,00<br>\$ 9,00<br>\$ -0 -                  |
| Max Height No. Pkg. Spaces No. Ldg. Spaces Max Cover Petition or Appeal Required-Date  ORK INFORMATION  rilding: Ground Floor Area sq. ft. Basement Floor Area sq. ft.  rage Floor Area sq. ft. 2nd Floor Area sq. ft. Other sq. ft.  ze: Width Length Stories Height  ilding Volume (for Demolition Permit) cubic feet  | District Lot Dimensions Area                                | Front Ya                   | rd Side               | Yard f         | lear Yard                                      |
| ORK INFORMATION  rilding: Ground Floor Area sq. ft. Basement Floor Area sq. ft.  rrage Floor Area sq. ft. 2nd Floor Area sq. ft. Other sq. ft.  ze: Width Length Stories Height  rilding Volume (for Demolition Permit) cubic feet   |   | *                          |                       |                | 6  |
| DRK INFORMATION  rilding: Ground Floor Area sq. ft. Basement Floor Area sq. ft.  rage Floor Area sq. ft. 2nd Floor Area sq. ft. Other sq. ft.  ze: Width Length Stories Height  rilding Volume (for Demolition Permit) cubic feet  | Max Height No. Pkg. Spaces No. Ldg. Space                   | es Max Cove                | <u>Petiti</u>         | on or Appeal   | Required-Date                                  |
| rilding: Ground Floor Area   |   | . **_ :-                   |                       |                | ·  |
| ze: Width sq. ft. 2nd Floor Area sq. ft. Other sq. ft.  ze: Width Length Stories Height  ilding Volume (for Demolition Permit) cubic feet  | DRK INFORMATION   | *                          |                       |                |  |
| ze: Width Length Stories Height ilding Volume (for Demolition Permit) cubic feet   |   |                            |                       |                |  |
| ze: Width Length Stories Height ilding Volume (for Demolition Permit) cubic feet   | rage Floor Area sq. ft. 2nd Floor Area                      | sq. ft. 0                  | ther                  |                | sq. ft.  |
|  |   |                            |                       |                |  |
|  | ilding Volume (for Demolition Permit) cub                   | ic feet                    | 3                     |                |  |
|  |   |                            |                       |                |  |
|  |   |                            |                       |                |  |

| ELECTRICAL:                   | Contractor   | Phone   |
|-------------------------------|--|---|
|                               | Address  | ESTIMATED COST = \$   |
| Type of Work:                 | ( )New ( )Service Change ( )Rewiring ( )Add'l Wiring TEMPO   | RARY ELEC. REQUIRED - ( )Yes ( )No  |
| *                             | Size of ServiceUnderground Overhead  | Number of New Circuits  |
| Description of                | F Work:  |   |
| PLUMBING:                     | Contractor   | Phone   |
|                               | Address  | ESTIMATED COST = \$   |
| WATER TAP REQU                | IIRED ( )Yes ( )No Size Type of Pipe   | Water Dist. Pipe  |
| SANITARY SEWER                | R TAP REQUIRED - ( )Yes ( )No-Size Type of Pipe  | Or. Waste Vt. Pipe  |
|                               | TAP REQUIRED - ( )Yes ( )No Type of Pipe STREE   |   |
|                               | Main Building Drain Size = Main  |   |
| LIST NUMBER OF                | PLUMBING FIXTURES BELOW:   |   |
| Water Closets                 | = Bathtubs = Showers = Ki  | tchen Sinks = Disposal =  |
| Clothes Washer                | = Floor Drains = Dishwasher = Other  | Total =   |
|                               | F Work:  | 8 T   |
| MECHANICAL:                   | Contractor   | Phone   |
|                               | Address ESTIM  | ATED COST = \$  |
|                               | 4 - ( )Forced Air ( )Gravity ( )Hot Water ( )Steam ( )Unit Heat  |   |
| TYPE OF FUEL -                | - ( )Electric ( )Natural Gas ( )Propane ( )Wood ( )Coal ( )Sol   | ar ( )Geothermal Other  |
| NUMBER OF HEAT                | T ZONES = HOT WATER - ( )One (1) Pipe ( )Two (2)   | Pipes ( )Series Loop  |
| ELECTRIC HEAT                 | - Number of Circuits Number of Furnaces Nu   | mber of Hot Air Runs  |
| Number of Hot                 | Water Radiators Total Heat Loss Rated Capa   | city of Furnace/Boiler  |
| LOCATION OF HE                | EATING UNITS - ( )Crawl Space ( )Floor Level ( )Attic ( )Sus   | pended ( )Roof ( )Outside   |
|                               | f Work:  |   |
| DRAWINGS REQUI                | IRED: All applications must be accompanied by two (2) complete seans, Floor Plans, Structural Framing Plans, Exterior Elevations, Seyout, Blumbing Isometric, Heating Layout, etc. All Plans shall be the Site Plans, and show electric panel and furnace locations.     | ts of Drawings including Site Plans,<br>ction and Details, Stair Details, |
| to complete the Building Code | BELOW: The undersigned hereby makes application for a Permit for ne work in strict accordance with all applicable provisions of the the Napoleon Building and Zoning Codes, the Napoleon Engineering ifications and other pertinent sections of the Napoleon Code of Ord | current edition of the C.A.B.O.<br>Department Rules and Regulations,      |
| Signature of A                | Applicant  | Date  |
|                               | •  |   |

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