

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

Permit No. <u>3585</u> Issued <u>06/19/95</u>	FEES	BASE	PLUS	TOTAL
Job Location <u>709 W. Main St.</u>	<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$	\$ <u>9.00</u>
Lot _____	<input type="checkbox"/> Electrical	\$	\$	\$
Issued by <u>Brent N. Damman</u>	<input type="checkbox"/> Plumbing	\$	\$	\$
Owner <u>Ruth Stevens</u> <u>592-6281</u>	<input type="checkbox"/> Mechanical	\$	\$	\$
Address <u>709 W. Main St.</u>	<input type="checkbox"/> Demolition	\$	\$	\$
Agent _____	<input type="checkbox"/> Zoning	\$	\$	\$
Address _____	<input type="checkbox"/> Sign	\$	\$	\$
Use Type - Residential <u>X</u>	<input type="checkbox"/> Water Tap	\$	\$	\$
Other - Describe _____	<input type="checkbox"/> Sew. Insp.	\$	\$	\$
No. Dwelling Units _____	<input type="checkbox"/> Sewer Tap	\$	\$	\$
New <u>X</u> Replacement _____	<input type="checkbox"/> Temp. Water	\$	\$	\$
Add'n. _____ Alter _____ Remodel _____	<input type="checkbox"/> Temp. Elec.	\$	\$	\$
Fixed Occupancy _____	TOTAL FEES.....			\$ 9.00
Change of Occupancy _____	LESS FEES PAID.....			\$ 9.00
Estimated Cost \$ <u>205.00</u>	BALANCE DUE.....			\$ -0-

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: Side & Rear Fence

PAID
 JUN 20 1995
 CITY OF NAPOLEON

Date 6-19-95 Applicant Signature Ruth Stevens

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. 3585 ISSUED 6-19-95

JOB LOCATION 709 W. Main

LOT _____
(Subdivision or Legal Description)

ISSUED BY BND
(Building Official)

OWNER Ruth Stevens PHONE 592-6281

ADDRESS 709 W. Main

AGENT _____ PHONE _____

ADDRESS _____

USE: Residential () Commercial () Industrial
() Other _____

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

ESTIMATED COST = \$ 205.00

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

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

TOTAL FEES	\$ <u>9.00</u>
Less Fees Paid	\$ <u>9.00</u>
BALANCE DUE	\$ <u>-0-</u>

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>

<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Ldg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>

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: side & rear fence

<p>PAID</p> <p>JUN 20 1995</p> <p>CITY OF NAPOLEON</p>

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 _____

FROM

Countyline Carpenters Proposal
c/o Kenny Drewes
29605 Rt. 3
Defiance, OH 43512 709 W. Main

Proposal No.

Sheet No.

Date

Proposal Submitted To

Work To Be Performed At

Name Mrs Stevens
Street
City NAPOLEON
State OHIO
Telephone Number

Street
City State
Date of Plans
Architect

We hereby propose to furnish all the materials and perform all the labor necessary for the completion of

STRIP OFF OIL SHINGLE AND DISPOSE
REPLACE WITH 25yr GM Shingle
ROSHRATH WITH 3/8 OSB PARTICLE BOARD
BACK OLD SOFIT + FACHIA WITH ALUM + Urethane
STRAIGHTEN UP PORCH FOUNDATION WITH OUT MAJOR RECONSTRUCTION

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work and completed in a substantial workmanlike manner for the sum of Dollars (\$ 6750.00).

with payments to be made as follows:

1/2 when START - 1/2 when complete

Any alteration or deviation from above specifications involving extra costs, will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance upon above work. Workmen's Compensation and Public Liability Insurance on above work to be taken out by _____

Respectfully submitted Ken + Steve

Per _____

Note — This proposal may be withdrawn by us if not accepted within 10 days

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Accepted _____ Signature _____

Date _____ Signature _____



