

# THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

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## Building Permit

Page 1 of 1

Permit Number: BP2008-14

Printed: 3/24/2008

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### ADDRESS:

**756 Main St. W.**

### Applicant

Name: Hanson's Window Company, LLC

Address: 385 W Dussel Dr

Approval Date: 3/24/2008

419-482-8400

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### Owners

Name: Matt Starkey

Address: 756 W Main St

Napoleon, OH 43545

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### Contractors

Contractor Type: Other

Name: Hanson's Window Company, LLC

Maumee, OH 43537

Address: 385 W Dussel Dr

Phone: 419-482-8400

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### Fees and Receipts:

Number	Description	Amount
FEE2008-157	Reroofing/Siding/Gutters (Auto	\$26.00
FEE2008-158	State 1% fee (Calc)	\$0.26
<b>Total Fees:</b>		<b>\$26.26</b>
RCPT2008-109		\$26.26
<b>Total Receipts:</b>		<b>\$26.26</b>

roof

APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**REMINDER: YOU MUST CALL (419)592-4010 FOR AN INSPECTION**





# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS, REMODELING.

DATE: 3/17/08 JOB LOCATION: 756 W. MAIN STREET

OWNER: MATT STARKEY PHONE: 419-592-1810

OWNER ADDRESS: 756 W. MAIN STREET CITY: NAPOLEON ZIP: 43545

CONTRACTOR: HANSONS

PHONE #: 248-561-3030 CELL PHONE# \_\_\_\_\_

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES  NO:

Is any of the above job going to be subcontracted out? Yes  No:

If yes to whom: \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: Roof on Home

ESTIMATED COMPLETION DATE: \_\_\_\_\_

## PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- |  |   |
|--|---|
| <input type="checkbox"/> A/C ADD ON 1%                 | <input type="checkbox"/> REMODELING 1%            |
| <input type="checkbox"/> BOILER REPLACEMENT 1%         | <input checked="" type="checkbox"/> ROOFING 1%    |
| <input type="checkbox"/> CURBING                       | <input type="checkbox"/> SEWER REPAIRS**          |
| <input type="checkbox"/> DECKS * 1%                    | <input type="checkbox"/> SIDEWALK*                |
| <input type="checkbox"/> DRIVEWAY*                     | <input type="checkbox"/> SIDING 1%                |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE 1% | <input type="checkbox"/> SHED* (under 200 sq ft)  |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW 1%     | <input type="checkbox"/> SHED* (over 200 sqft) 1% |
| <input type="checkbox"/> SWIMMING POOL* 1%             | <input type="checkbox"/> FENCE*                   |
| <input type="checkbox"/> FURNACE REPLACEMENT 1%        | <input type="checkbox"/> TEMP ELECTRIC 1%         |
| <input type="checkbox"/> ADDITIONS* 1%                 | <input type="checkbox"/> FURNACE NEW 1%           |
| <input type="checkbox"/> WATER TAP (size _____")       | <input type="checkbox"/> WINDOWS /DOORS 1%        |
| <input type="checkbox"/> LAWN METER 1%                 |   |
| <input type="checkbox"/> PLUMBING 1%                   |   |

## 1%- EFFECTIVE JUNE 1, 2007 BOARD OF BUILDING STANDARDS FEE

\*PLEASE INCLUDE A PICTURE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

\*\* IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE.



## PERMIT COST WORKSHEET

<i><b>JOB</b></i>	<i><b>BASE FEE</b></i>	<i><b>1% BBS FEE =</b></i>	<i><b>PERMIT TOTAL</b></i>
SIDING (only) TOTAL SQ _____ X 1.00 = _____ +	\$5.00	+	1% =
ROOFING (only) TOTAL SQ _____ X 1.00 = _____ +	\$5.00	+	1% =
WINDOWS / DOORS(only) # ____ X 1.00 = _____ +	\$5.00	+	1% =
ELECTRICAL # OF CIRCUITS ____ X 3.00 = _____ +	\$15.00	+	1% =
ELECTRICAL SERVICE UPGRADE	\$15.00	+	1% =
PLUMBING (INSIDE) replacing/ repairs	\$10.00	+	1% =
SEWER (OUTSIDE)	\$25.00		N/A
WATER HEATER	\$5.00	+	1% =
SHED UNDER 200 SQ FT (over 200 see chart)	\$5.00		N/A
FURNACE OR A/C (REPLACEMNT)	\$5.00	+	1% =
DEMOLITION (only)	\$30.00		N/A
SIDEWALK REPLACEMENT/ NEW	\$25.00		N/A
DRIVEWAY	\$25.00		N/A

ALL CONSTRUCTION, ALTERATIONS, REMODELING, SHEDS, DECKS, & FENCES NOT LISTED ABOVE IS BASED ON COST OF WORK BEING PERFORMED.

COST OF WORK \$ \_\_\_\_\_ (SEE CHART) permit fee \$ \_\_\_\_\_ + 1 % = \$ \_\_\_\_\_

0.00	-	250.00	0.00	11,000.00	-	11,999.00	25.00
250.00	-	999.00	10.00	12,000.00	-	12,999.00	26.00
1,000.00	-	1,999.00	12.00	13,000.00	-	13,999.00	27.00
2,000.00	-	2,999.00	14.00	14,000.00	-	14,999.00	28.00
3,000.00	-	3,999.00	16.00	15,000.00	-	15,999.00	29.00
4,000.00	-	4,999.00	18.00	16,000.00	-	16,999.00	30.00
5,000.00	-	5,999.00	19.00	17,000.00	-	17,999.00	31.00
6,000.00	-	6,999.00	20.00	18,000.00	-	18,999.00	32.00
7,000.00	-	7,999.00	21.00	19,000.00	-	19,999.00	33.00
8,000.00	-	8,999.00	22.00	20,000.00	-	20,999.00	34.00
9,000.00	-	9,999.00	23.00	21,000.00	-	21,999.00	35.00
10,000.00	-	10,999.00	24.00	22,000.00	-	22,999.00	36.00
				Over 22,999		Please Call	

\*OTHER FEES NOT LISTED  
MAY APPLY

***TOTAL PERMIT COSTS \$*** \_\_\_\_\_

Historical District  Yes  No  
 Main Cross Streets \_\_\_\_\_ Ms./Mrs. Work NONE  
 Ranch  Colonial  Contemporary   
 Year Home Built 1906 BEST 9 to 5 Number to Call HOME

Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE  
 Mr. Work NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE  
 Mr. Email NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE  
 Billing Address SAME

Mrs./Ms. First AMBER Last STANKEY  
 City NAPOLEON State OH Zip 43545  
 Mr. Work NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE  
 Mr. Email NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE

Type of Home: House  Condo  MHC   
 (Check all that apply)  
 1 Story  2 Story  3 Story   
 Frame  Brick  Bungalow   
 Year Home Built 1906

Mrs./Ms. First AMBER Last STANKEY  
 City NAPOLEON State OH Zip 43545  
 Mr. Work NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE  
 Mr. Email NONE Mr. Cell \_\_\_\_\_ Ms./Mrs. Email NONE

**HOME IMPROVEMENT INSTALLMENT CONTRACT AND AGREEMENT**  
 (2). You are entitled to two completely filled in copies of this contract. (3). Under the law, you have the right to pay off in advance the full amount due and, under certain conditions, to obtain a partial refund of the finance charge. (4). You may rescind or cancel this contract, not later than 5 P.M. On the business day following the date this agent at his place of business given in the contract or by mailing the notice or cancellation to the contractor in the place of business given in the contract by depositing a properly addressed certified letter in a United States Post Office or mail box, but if you rescind 5 P.M. On the business day following, you are still entitled to offer your agent at his place of business given in the contract. (5). The Owners of the below described premises hereby contract with and authorize you as Contractor (Hansons Window and Construction, Inc. DBA Hansons Window and Siding), to furnish all necessary materials, labor and workmanship, to install, construct and place the improvement on those premises described below.

Square Feet	Minimum Number of Can Vents	Minimum Feet of Ridge Vent	Vented Drip Edge
1000	5	14	28
1500	8	20	40
2000	10	27	54
2500	12	34	68
3000	15	40	80
3500	17	47	94



**2 Builder's Grade**  
 • 25-year asphalt shingle  
 • 3-tab only  
 • 3-foot water/ice shield  
 • 30 lb. felt paper  
 • # \_\_\_\_\_ 750 can vents  
 • Existing drip edge  
 • 5-year labor warranty  
 • 1-time transferable  
 • 25-year mtg. warranty

COMMENTS BUILD GADOLE IF NEEDED  
found 3-11-08

**4 Ultimate**  
 • 50-year architectural shingle, Dimensional only  
 • Water/ice shield - entire roof (all ridges and valleys)  
 • Pipe covers, cap master, new drip edge  
 • 200 sq. ft. wood covered (if needed)  
 • Vented drip edge (if applicable)  
 • Unlimited transferable lifetime Labor / Material guarantee  
 • Money-back guarantee  
 • Free yearly Hansons inspections and flashing checks upon request  
 • # \_\_\_\_\_ 750 can vents  
 • # Ft. \_\_\_\_\_ Ridge vents

INIT. \_\_\_\_\_  
 Here are the names of friends or family to file to refer.  
 Detroit  
 Lansing  
 Toledo  
 Columbus  
 Other \_\_\_\_\_  
 Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Friend  Relative  Neighbor   
 Name \_\_\_\_\_ Telephone \_\_\_\_\_  
 Friend  Relative  Neighbor

I/We hereby acknowledge receipt of a copy of the pamphlet, "Protect Your Family From Lead In Your Home", informing me/us of the potential risk of lead hazard exposure from renovation activity to be performed in my/our home. I/we received this pamphlet before the work began.  
 In \_\_\_\_\_ Int. \_\_\_\_\_

IN WITNESS WHEREOF the parties have here unto signed their name(s) this 10 day of MARCH 2008  
 MICHIGAN / OHIO HOME SOLICITATION SALES ACT rescission cut off date:  
13 day of MARCH 2008  
 X Math R Stutz Owner  
 X Amber Stankey Owner  
 Witness: \_\_\_\_\_ (Businessman's Name)  
 Customer agrees to pay for all building permit costs (See back of Contract, Paragraph 9, Section C).

his transaction at any time prior to midnight of the third business day after the date of this transaction, an explanation of this right. Additionally, the seller is prohibited from having an independent courier evidence before the end of the 3- business-day period in which you can cancel the transaction.  
 Hansons will provide & install for a charge of \$25.00 each.  
 Down Payment and/or Final Payment in form of:  
 Cash  Check # \_\_\_\_\_ Visa  Mastercard  Discover   
 Credit card in the name of: \_\_\_\_\_  
 Credit card account # \_\_\_\_\_  
 Exp. Date \_\_\_\_\_  
 3 or 4 Digit CPU Code \_\_\_\_\_

Includes Cleanup & Haul away. Taxes & Discounts Included  
 SIGN POSTED 90 DAYS.  
 \* Lifetime Plus Guarantee (See Reverse Side for Details)  
**Noticed wood or cedar shake roof is beyond our control.**  
**There will be an extra charge per 4 x 8 sheet of OSB wood of \$36 at 3 sheets per square. 40 MS**  
**Extra charge for 1 x 6 = \$6.00 per ft.**  
**This is in addition to price.**  
**SEE ITEM #15 B ON REVERSE SIDE**



Mr. First Mr.  
 Job Address 1  
 Home Phone 1  
 Ms./Mrs. Cell 4  
 FWN: Window  
 Floating Install

Notice to buyer: (\*) Do not sign this contract before you read it, understand the terms and conditions, and have had the opportunity to ask questions or request clarification. The Contractor or subcontractor shall be responsible for obtaining all necessary permits and licenses for the work to be performed. The Contractor or subcontractor shall be responsible for obtaining all necessary insurance coverage. The Contractor or subcontractor shall be responsible for obtaining all necessary approvals from the local authorities. The Contractor or subcontractor shall be responsible for obtaining all necessary permits and licenses for the work to be performed. The Contractor or subcontractor shall be responsible for obtaining all necessary insurance coverage. The Contractor or subcontractor shall be responsible for obtaining all necessary approvals from the local authorities.

ROOF STYLE  Gable  Hip  Gambrel

Home  Garage

# Sq. Ft. 21.50 # Sq. Ft. 0

Tear off Only  Tear off Only

# of Layers 1 2 3 # of Layers 1 2 3

Pitch 12/12 Pitch 12/12

Single Color SWART Drip Edge Color W

**1 Econoline**

- 20-year Organic 3-tab or dimensional shingle
- 3-foot water/ice shield
- 15 lb. felt paper
- # 550 Can vents
- Existing drip edge
- 1-Time Transferable
- 20-year warranty
- 1-Year Labor Warranty

**Smart Choice Energy Saver**

- 30/30 Guarantee Skingyle® (24-in. x 36-in.)
- Hanson's Guard
- Minimum 6-foot water/ice shield (all edges and valleys)
- Pipe covers, cap nester, new drip edge
- 100 sq. ft. wood covered (if needed)
- Vented drip edge, (if applicable)
- 1-time transferable
- 30 Year Labor / Material guarantee
- Money-back guarantee
- Free Yearly Hanson's Inspections and flashing checks upon request
- 750 can vents  3-Tab
- 12 Ft. 00 Ridge vents  Dimensions

**BUYERS RIGHT TO CANCEL:** You, the buyer, may cancel this contract at any time before the start of work. See the notice of cancellation form on the reverse side for details. Certain city building codes require smoke detectors.

For the total cash price of \$80

Buyers down payment amount of \$ 0  
 (50% Deposit Req.)

Cash to be paid upon Substantial completion \$ 0  
 Amt. to be financed by financial Co. upon substantial completion \$80

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**THE CITY OF NAPOLEON**  
**BUILDING & ZONING DEPARTMENT**  
**255 W. RIVERVIEW**  
**(419)592-4010**



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**Inspections**

Page 1 of 1

**Address:** 756 Main St. W.

Printed: 6/3/2008

**Applicant:** Hanson's Window Company, LLC

**Permit Number:** BP2008-14

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**Inspection Date:** 6/3/2008  
**Inspection Number:** INSP2008-113  
**Inspection Type:** Building Final

**Inspector:** Tom  
**Status:** Complete  
**Passed?**

**Required Steps:**

**Comments:**

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**Other Fields:**

