

PERMIT

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

Permit No. 01186 Issued 6-18-86
date

Job Location 7 Martha Lane
address

Lot 4 Majestic Htgs. Add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner James Kuser
name tel.

Address 7 Martha Lane

Agent Bills Plumbing & Heating 599-1786
builder-eng.-etc. tel.

Address 1201 Woodlawn Ave.

Description of Use Residential

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ _____

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input type="checkbox"/> ELECTRICAL			
<input checked="" type="checkbox"/> PLUMBING	3.00	2.00	5.00
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			\$5.00
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
A	164' X 220.98-128.83	32,369 S.F.	30' Min.	7' Min.	15' Min.
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
35' Max.	2-Min.		35%		

WORK INFORMATION:

Size: Length 12' Width 15' Stories 1 Ground Floor Area 180 Sq. Ft.

Height 13' Building Volume (for demo. permit) _____ cu. ft.

Electrical: Applied for seperately
brief description

Plumbing: Spa - Drain & Sink
brief description

Mechanical: Applied for seperately
brief description

Sign: None Dimensions _____ Sign Area JUN 20 1986
type

Additional Information: Smoke detectors required at bedroom area and on

PAID

Date 6/20/86 Applicant Signature James K Kuser
owner-agent

INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	P
PLUMBING	Building Drains			Drainage, Waste & Vent Piping			Indirect Waste <i>W</i>	<i>6/23</i>	<i>ET</i>	Drainage, Waste & Vent Piping		
	Water Piping									Backflow Prevention		
	Building Sewer			Water Piping			Condensate Lines			Water Heater		
	Sewer Connection										FINAL APPROVAL	
MECHANICAL	Refrigerant Piping			Refrigerant Piping			Chimney(s)			Grease Exhaust System		
				Duct Furnace(s)			Fire Dampers			Air Cond. Unit(s)		
	Ducts/Plenums			Ducts/Plenums			<input type="checkbox"/> Radiant Htr(s) <input type="checkbox"/> Unit Htr(s)			Refrigeration Equipment		
				Duct Insulation			Pool Heater			Furnace(s)		
				Combustion Products Vents			Ventilation <input type="checkbox"/> Supply <input type="checkbox"/> Exhst.			FINAL APPROVAL		
ELECTRICAL	Conduits & or Cable			Conduits/ Cable			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			Temp Service Temp Lighting		
	Grounding & or Bonding			Rough Wiring			<input type="checkbox"/> Generator(s) <input type="checkbox"/> Motors			Fixtures Lampholders		
	Floor Ducts Raceways			Service Panel Switchboard			<input type="checkbox"/> Water Htr <input type="checkbox"/> Welder			Signs		
	Service Conduit			Busways Ducts			<input type="checkbox"/> Heaters <input type="checkbox"/> Heat Cable			Electric Mtr. Clearance		
	Temporary Power Pole			Subpanels			<input type="checkbox"/> Duct Htr(s) <input type="checkbox"/> Furnace(s)			FINAL APPROVAL		
BUILDING	Location, Set-backs, Esmt(s)			Exterior Wall Construction			Roof Covering Roof Drainage			Smoke Detector		
	Excavation						Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls			Columns & Supports			Fireplace Chimney					
	Sub-soil Drain			Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access			Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access					
	Piles			Floor System(s)						FINAL APPROVAL BLDG. DEPT.		
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSRECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					
							<i>* WATER TEST VENT VENT THRU 5'-0" ABOVE RL. UNDER ROOF NOT DETECTED,</i>					

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Plumbing: Spa - Drain & Sink brief description

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Sign: None Dimensions _____ Sign Area _____

Additional Information: Smoke detectors required at bedroom area and on each story.

PAID
JUN 20 1986
CITY OF NAPOLEON

Date 6/20/86 Applicant Signature James K. Kuser owner-agent

RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON
255 West RiverView Ave.
Napoleon, Ohio 43545
419/592-4010

ADDENDUM TO Permit No. 01180
Owner JAMES KICKER
Contractor FRANK SCOTT
Location 7 MARTHA LANE

Please note the items checked below and incorporate them into your plans as indicated: PERMIT NOT YET ISSUED, CORRECT PLANS AND RE-SUBMIT. PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL					
<input checked="" type="checkbox"/>	Provide approved smoke detector(s) as req'd.		Show size of members supporting porch roof.		
	Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.		Provide double top plate for all bearing partitions and exterior walls.		
	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)		Provide design data for prefab wood truss.		
<input checked="" type="checkbox"/>	Submit fully dimensioned plot plan.		Ceiling joists undersized in _____.		
<input checked="" type="checkbox"/>	Provide min. of 1-3'0" x 6'8" exit door.		Roof rafters undersized in _____.		
	Provide min. 22" x 30" attic access opening.		PLUMBING AND MECHANICAL		
	Provide min. 18" x 24" crawl space access opening.		Terminate all exhaust systems to outside air.		
	Provide approved sheathing or flashing behind masonry veneer.		Insulate ducts in unheated areas.		
<input checked="" type="checkbox"/>	Provide min. 15# underlayment on roof.		Provide backflow prevention device on all hose bibs.		
	Provide adequate fireplace hearth.		Terminate pressure and temperature relief valve drain in an approved manner.		
	Install factory built fireplaces/stoves according to manufacturers instructions.		Provide dishwasher drain with approved air gap device.		
	Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.		METAL VENEERS		
	LIGHT AND VENTILATION		Contact City Utilities Dept. to remove conductors and/or meter.		
	Provide mechanical exhaust or window in bathroom		Provide approved system of grounding and bonding.		
<input checked="" type="checkbox"/>	Provide min. _____ Sq. In. net free area attic ventilation.		ELECTRICAL		
	Provide min. _____ Sq. In. net free area crawl space ventilation.		Show location of service entrance panel and service equipment panel.		
	FOUNDATION		G. F. C. I. req'd. on temporary electric.		
	Min. depth of foundation below finished grade is 32".		Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.		
	Min. size of footer _____" x _____".		Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.		
<input checked="" type="checkbox"/>	Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.		Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.		
	Show size of basement columns.		INSPECTIONS		
	FRAMING		The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.		
	Show size of wood girder in _____.		<input checked="" type="checkbox"/>	Footers and Setbacks.	Building sewer.
	Provide design data for structural member in _____.		<input checked="" type="checkbox"/>	Foundation.	HVAC rough-in.
	Floor joists undersized in _____.			Plumbing rough-in.	<input checked="" type="checkbox"/> Final Building
	Provide double joists under parallel bearing partitions.			Plumbing final.	other,
<input checked="" type="checkbox"/>	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.			Electrical service.	
<input checked="" type="checkbox"/>	Show size of headers for openings over 4' wide _____.			Electrical rough-in.	
				Electrical final	

Additional Corrections. 12" BRICK WALL BOWN 54 ROOF GAN AND INTERIOR

OF BUILDING

The approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No. 01180 and made a part thereof. DATE APPROVED OR DISAPPROVED 6-13-86 Checked by 54 Plan Examiner.
DATE RECHECKED AND APPROVED _____ Checked by _____



UNIVERSITY OF CALIFORNIA
 DEPARTMENT OF CIVIL ENGINEERING
 101 SHREVE DRIVE, BERKELEY, CALIF. 94720
 (415) 845-5000

This application is for the installation, replacement, or alteration of plumbing systems or devices as herein specified, agreeing to do all such work in strict accordance with the City of Berkeley's Plumbing Code for 1973 and 1974 amendments.

Owner's Name: **JAMES KUSER** Address: **7 MARTHA LN.**

Contractor's Name: **BILL'S PLUMBING** Address: **1201 WOODLAWN** Tel. _____

City: _____

Description of Project: _____ Lot # _____

Subdivision: _____

Plumbing System: _____

Single Family _____ Multiple Family _____ Industrial Family _____ New Construction _____

Number of Stories: _____

Plumbing System: _____

Plumbing System: _____

Size of Main Building Water: _____ ✓

Size of Main Sewer: _____ ✓

Requires Water: **NO** Requires Sewer: **NO**

Size and Type of Water Tap: _____

Size and Type of Sewer Tap: _____

No. of Water Closets: _____ No. of Sump Pumps: _____

No. of Bathrooms: _____ No. of Lavatories: **1**

No. of Kitchen Sinks: _____ No. of Automatic Washers: _____

No. of Dishwashers: _____ No. of Hot Water Heaters: _____

No. of Dishwashers: _____ No. of Water Pans: _____

No. of Floor Drains: **1** Other: _____

Main Drainage Outlet to: Storm Sewer _____ Other _____

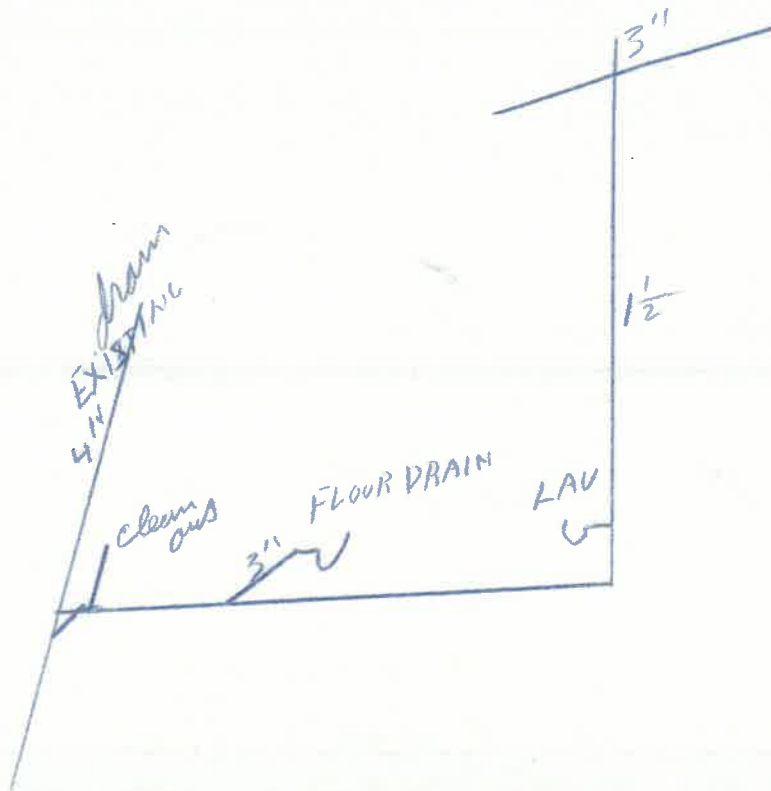
APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF A PLUMBING SPECIFICATION, WITH ALL CODES AND TRAPS PROPERLY SIZED. MUST INDICATE IN ALL SPECIFICATIONS THE DATE 1973.

ESTIMATED COST OF THIS PROJECT: _____

Date: **6-18-86** CONTRACTOR'S SIGNATURE: **William Elms**
 OWNER-CONTRACTOR-AGENT

COPY

BILL'S PLUMBING & HEATING
William Elling
1201 Woodlawn Avenue Napoleon, Ohio 43545



Phone 599-1786

