

P E R M I T

CITY OF NAPOLEON
255 W. RIVERVIEW AVE
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING
PH (419) 592-4010
FAX (419) 599-8393

PERMIT NO: 1489

DATE ISSUED: 01-14-03

ISSUED BY: MRD

JOB LOCATION: 135 E MAUMEE AVE

EST. COST:

LOT #:

SUBDIVISION NAME:

OWNER: HOPE SERVICES HCBDD
ADDRESS: 135 E MAUMEE AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-599-2892

AGENT: FLOYD P BUCHER & SON
ADDRESS: 5314 DORR ST
CSZ: TOLEDO, OH 43615
PHONE: 419-531-2802

USE TYPE - RESIDENTIAL:

OTHER:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD:
MAX HT: # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

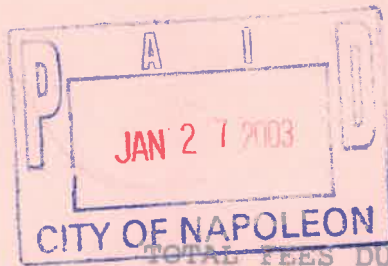
WORK TYPE - NEW: REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
NEW SEWER LINE

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
SEWER INSPECTION PER		110.00



TOTAL FEES DUE 110.00

1-27-03

DATE

Floyd P. Bucher

APPLICANT SIGNATURE

CITY OF NAPOLEON

WATER METER YOKE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" WATER METER YOKE ASSEMBLY
(Please pickup at City Operations Department 1775 Industrial Drive).

PERMIT #: 1580

ISSUED: 04-17-2003

JOB LOCATION: 135 E MAUMEE AVE

OWNER: HOPE SERVICES HCBDD

PHONE: 419-599-2892

ADDRESS: 135 E MAUMEE AVE NAPOLEON, OH 43545

CONTRACTOR: FLOYD P BUCHER & SONS, INC.

ADDRESS: 5314 DORR ST TOLEDO, OH 43615

PHONE: 419-531-2802

WATER TAP SIZE 1" _____ 1.5" _____ 2" X OTHER _____

WATER METER YOKE SIZE 5/8" _____ 3/4" _____ 1" _____ OTHER 1 1/2"

NEW STRUCTURE X EXISTING STRUCTURE _____ LAWN METER _____

WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING
OF 1" MINIMUM SIZE.

BACKFLOW DEVICE REQUIRED YES X NO _____

TYPE OF BACKFLOW DEVICE REQUIRED RPZ

WATER METER YOKE INSTALLATION IS SUBJECT TO THE FOLLOWING CONDITIONS

- 1.) MUST BE LOCATED IN AN ACCESSIBLE AREA.
- 2.) MUST BE IN AN AREA WHICH IS NOT SUBJECT TO FREEZING TEMPERATURES.
- 3.) MUST BE AT LEAST 18" ABOVE FLOOR LEVEL (NO CRAWL SPACE INSTALLATIONS).
- 4.) MUST COMPLY WITH MINIMUM MOUNTING REQUIREMENTS (DRAWING AVAILABLE)

ISSUED BY _____ RECEIVED BY _____

1-Copy to: Building Dept, Water Dept, and Utilities Dept

CITY OF NAPOLEON WATER TAPPING PERMIT FORM

PERMIT #:

ISSUED:

JOB LOCATION: _____

SUBDIVISION NAME: _____ LOT #: _____

OWNER: Hope Services

ADDRESS: 135 E. MAUMEE

CONTRACTOR: _____ PHONE: _____

TAP SIZE: 1" _____ 1.5" _____ 2" X OTHER _____

AMOUNT PAID: _____ YOKE SIZE: _____

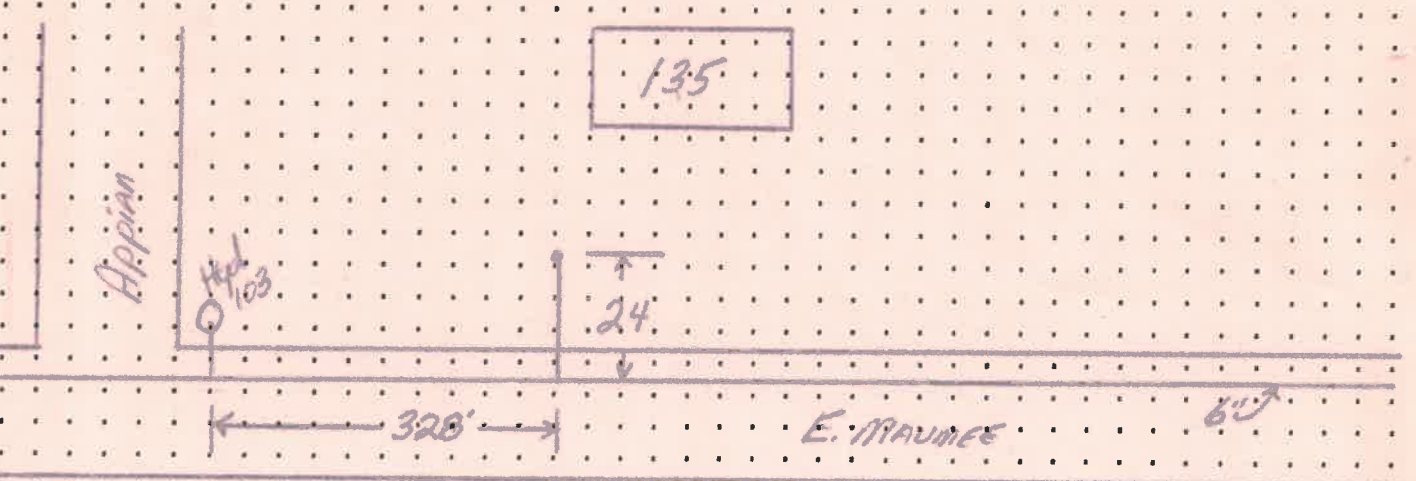
PLUMBING CONTRACTOR: _____ PH: _____

DATE OF TAP: 4-21-03 OLD TAP #: 8826 NEW TAP #: 0303

SIZE AND KIND OF MAIN: 6" CIP

LOCATION OF MAIN: 10' North of South curb DEPTH OF MAIN: 5'

DIST FROM HYDRANT\VALVE: 328' North DIST TO CURB STOP FROM CORP: 24'



DATE APPROVED: Apr 2, 03

BY: [Signature]