

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

Permit No. <u>2773</u> Issued <u>9-28-92</u>		FEES	BASE	PLUS	TOTAL
Job Location <u>234 West Maumee</u>	<input checked="" type="checkbox"/>	Building	\$ 9.00	\$	\$ 9.00
Lot _____	<input type="checkbox"/>	Electrical	\$	\$	\$
Issued by <del>XXX</del> <u>Brent N. Damman</u>	<input type="checkbox"/>	Plumbing	\$	\$	\$
Owner <u>Bill Cole</u> <u>592-9174</u>	<input type="checkbox"/>	Mechanical	\$	\$	\$
Address <u>234 W. Maumee, Ohio</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 <u>1</u>	<input type="checkbox"/>	Sewer Tap	\$	\$	\$
New <u>Replacement</u>	<input type="checkbox"/>	Temp. Water	\$	\$	\$
Add'n. <u>Alter</u> <u>Remodel</u>	<input type="checkbox"/>	Temp. Elec.	\$	\$	\$
Mixed Occupancy _____	TOTAL FEES.....\$ 9.00				
Change of Occupancy _____	LESS FEES PAID...9-28-92...\$ 9.00				
Estimated Cost \$ <u>125.00</u>	BALANCE DUE.....\$ 0.00				

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: Reroof and resheet part of roof area

Date 9-28-92 Applicant Signature Bill Cole

**PAID**  
 SEP 28 1992  
 CITY OF NAPOLEON



**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. 2773 ISSUED 9-28-92

JOB LOCATION 234 W. Maumee

LOT \_\_\_\_\_  
 (Subdivision or Legal Description)

ISSUED BY BND  
 (Building Official)

OWNER Bill Cole PHONE 592-9174

ADDRESS 234 W. Maumee

AGENT \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

USE:  Residential ( ) Commercial ( ) Industrial  
 ( ) Other \_\_\_\_\_

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

ESTIMATED COST = \$ 125.00

	<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 Plan Review: Structure \_\_\_\_\_ Hours \_\_\_\_\_  
 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: Width \_\_\_\_\_ Length \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Building Volume (for Demolition Permit) \_\_\_\_\_ cubic feet

Description of Work: re roof + resheet part of roof area.

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 \_\_\_\_\_



APPLICATION  
for  
RESIDENTIAL BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS and DEMOLITION PERMIT  
from the  
CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 419-592-4010

Entry No. \_\_\_\_\_

Permit No. 02203 Issued 2-15-91

Job Location 234 Maumee Ln.

Lot PT. 8 Maumee Hqs.  
sub-div. or legal disc.

Issued By BND  
building official

Owner Steve Meyer Pn. \_\_\_\_\_  
14-272 Bridle Tr.

Address Strongsville, Ohio

Agent Von Dylan Plbg & Htg Pn. 592-4756

Address 116 E. Clinton

Description of Use Residence

Residential 2  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel X

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 2960.00

**-ZONING INFORMATION**

district	lot dimensions	area	front yd.	side yds.	rear yd.
<u>A</u>	<u>N/A</u>		<u>30'</u>	<u>7'</u>	<u>15'</u>
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd.	date appr
<u>35'</u>	<u>2 per</u>		<u>35%</u>		

**WORK INFORMATION:**

BUILDING: Garage Fl. Area \_\_\_\_\_ Basement Fl. Area \_\_\_\_\_ Second Floor Area \_\_\_\_\_

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

Height \_\_\_\_\_ Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Description of Work: \_\_\_\_\_

Ck. Permits Reg.	Base	Fees Plus	Total
Building			
Electrical			
Plumbing			
<u>X</u> Mechanical	<u>20.00</u>		<u>20.00</u>
Demolition			
Zoning			
Sign			
Water tap			
Sewer Tap			
Temp. Water			
Temp. Elec.			
Additional plan review	struc. _____ hrs	Elect. _____ hrs	
Total Fees			<u>20.00</u>
Less Min. Fees Pd.	<u>2-14-91</u> date		<u>20.00</u>
Balance Due			<u>0-0-</u>

**PAID**

FEB 14 1991

CITY OF NAPOLEON

Continue on Back Side for Electrical, Plumbing and Mechanical and other Information;