

**PERMIT**  
**CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING**  
**255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010**

Permit No. 317 Date 9-30-82  
 Job Location 844 Monroe Address Valuation \$ 1500.00  
 Owner Sam Homan Name Address 526 Euclid  
 Contractor Mel Lanzer Co. Name Telephone No. 592-2801  
 Address 2266 N. Scott St. Napoleon  
 Electric Contractor \_\_\_\_\_  
 Plumbing Contractor \_\_\_\_\_  
 Mechanical Contractor \_\_\_\_\_

**This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.**

**Work Information:**

Residential single Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
No. dwelling units  
 New Construction \_\_\_\_\_ Addition \_\_\_\_\_ Remodel X  
 Brief Description of Work relayed basement wall that had fell in approximately 20' long by 7' high

ISSUED BY \_\_\_\_\_ Building Official DEPT. OF BUILDING & ZONING

**It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:**

- Footing excavation prior to placing concrete.
- \_\_\_\_\_ Footing drains and foundation prior to backfill.
- \_\_\_\_\_ Prepared sub-grade prior to placing concrete floor slab.
- \_\_\_\_\_ Sanitary sewer
- \_\_\_\_\_ Rough-in electrical, plumbing and service framing prior to installing wall board.
- \_\_\_\_\_ Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

**PERMIT & FEES**

|                       |                |
|-----------------------|----------------|
| Building Permit       | \$ <u>6.00</u> |
| Electrical Permit     | \$ _____       |
| Plumbing Permit       | \$ _____       |
| Mechanical Permit     | \$ _____       |
| Demolition Permit     | \$ _____       |
| Zoning Permit         | \$ _____       |
| Sign Permit           | \$ _____       |
| Water Tap             | \$ _____       |
| Sewer Tap             | \$ _____       |
| Temp. Elec.           | \$ _____       |
| Other                 | \$ _____       |
| <b>TOTAL FEES</b>     | \$ <u>6.00</u> |
| <b>LESS FEES PAID</b> | \$ <u>-0-</u>  |
| <b>BALANCE DUE</b>    | \$ <u>6.00</u> |

**Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.**

# INSPECTION RECORD

| UNDERGROUND               |                              | ROUGH-IN & FINAL |                                 |      |           |
|---------------------------|------------------------------|------------------|---------------------------------|------|-----------|
| Type                      | Date                         | By               | Type                            | Date | By        |
| <b>PLUMBING</b>           | Sewer Connection             |                  | Drainage, W. & Vent             |      |           |
|                           | Building Sewer               |                  | Water Piping                    |      |           |
|                           | Water Piping                 |                  | Condensate Lines                |      |           |
|                           |                              |                  | Indirect Waste                  |      |           |
|                           |                              |                  | FINAL APPROVAL                  |      |           |
| <b>ELECTRICAL</b>         | Floor Ducts Raceways         |                  | Rough Wiring                    |      |           |
|                           | Conduits & or Cable          |                  | Conduits/ Cable                 |      |           |
|                           | Grounding & or Bonding       |                  | Service Panel Switchboard       |      |           |
|                           |                              |                  | Subpanels                       |      |           |
|                           |                              |                  | FINAL APPROVAL                  |      |           |
| <b>MECHANICAL</b>         | Refrigerant Piping           |                  | Refrigerant Piping              |      |           |
|                           | Ducts/ Plenums               |                  | Ducts/ Plenums                  |      |           |
|                           |                              |                  | Ventilation Supply              |      |           |
|                           |                              |                  | Exhst.                          |      |           |
|                           |                              |                  | FINAL APPROVAL                  |      |           |
| <b>BUILDING</b>           | Location, Set-backs, Esmt(s) |                  | Wall Construction               |      |           |
|                           | Excavation                   |                  | Crawl Space                     |      |           |
|                           | Footings & Reinforcing       |                  | Floor System(s)                 |      |           |
|                           | Sub-soil Drain               |                  | Roof System                     |      |           |
|                           | Foundation Walls             |                  | Fire Wall(s)                    |      |           |
|                           | Floor Slab                   |                  | Roof Cover Roof Drain           |      |           |
|                           |                              |                  |                                 |      |           |
|                           |                              |                  |                                 |      |           |
| FINAL APPROVAL BLDG. DEPT |                              | —                | Certificate of Occupancy Issued |      | #         |
|                           |                              |                  |                                 |      | 7/30/2004 |

**PERMIT**

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 Contractor Mel Lanzer Co. Name Telephone No. 592-2801  
 Address 2266 N. Scott St. Napoleon  
 Electric Contractor \_\_\_\_\_  
 Plumbing Contractor \_\_\_\_\_  
 Mechanical Contractor \_\_\_\_\_

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**PERMIT & FEES**

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CITY OF NAPOLEON  
 BUILDING INSPECTION DEPARTMENT  
 APPLICATION FOR BUILDING PERMIT  
 (please print or type)

The undersigned hereby makes application for construction, installation, or alternation work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project 844 MONROE Cost of Project \$1500<sup>00</sup>

Owner's Name SAM HOMAN Address 526 EUCLID

Contractor MEL LANZER CO Telephone No. 592-2801

Address 2266 N. SCOTT ST NAPOLEON, OHIO

Lot Information: (not required for siding job)

Lot No. \_\_\_\_\_ Subdivision \_\_\_\_\_

Zoning District \_\_\_\_\_ Lot Size \_\_\_\_\_ ft X \_\_\_\_\_ ft. Area \_\_\_\_\_ sq. ft.

Setbacks: Front \_\_\_\_\_ Right Side \_\_\_\_\_ Left Side \_\_\_\_\_ Rear \_\_\_\_\_

Work Information:

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

New Construction \_\_\_\_\_ Addition \_\_\_\_\_ Remodel \_\_\_\_\_

Accessory Building \_\_\_\_\_ Siding \_\_\_\_\_

Brief Description of Work: RELAYED BASEMENT WALL THAT HAD FELL IN. APPROX. 20' LONG X 7' HIGH

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ No. of Stories \_\_\_\_\_

Area: 1st Floor \_\_\_\_\_ sq. ft. Basement \_\_\_\_\_ sq. ft.

2nd Floor \_\_\_\_\_ sq. ft. Accessory Building \_\_\_\_\_ sq. ft.

3rd Floor \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.

Additional Information: THE BASEMENT BLOCK WALL HAD FELL IN + IT WAS PARTIALLY DUG OUT. WE FINISHED DIGGING IT OUT + LAYED NEW BLOCK BACK IN. ALSO REPAIRED FOOTER TILE + FOOTER

\*APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date 9/30/82 PApplicant's Signature Mel Lanzer

PERMIT NO. \_\_\_\_\_

517

PERMIT FEE \$ 6.00

