

Print Date: 09/28/2017



City of Napoleon Building Department

255 W. Riverview
P.O. Box 151
Napoleon, OH 43545
Phone: (419) 592-4010
Fax: (419) 599-8393
Email:

Outside Sewer

Permit Number: P-17-0352
Expiration Date: 09/28/2018

SPERRY, SHARON
1121 OHIO ST

Napoleon, OH

Description:

\$0.00 Sewer Outside 0.00 x \$0.0000

Building Permit Info

Project Description: Replace 20' existing
service with cleanout
Construction Value: \$400.00



Authorizing Signature

2017-09-28

Date

SCANNED

MBS 10-18-17

CITY OF NAPOLEON ZONING PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL DEMOLITIONS, FENCES, POOLS, SHEDS,
DRIVEWAYS, SIDEWALKS & SEWERS

DATE 9-27-17 JOB LOCATION 1121 OHIO ST. SHARON SPARE
 OWNER DONALD LAFONTAINE TELEPHONE # 419-875-5898
 OWNER ADDRESS SAME 419-812-0028
 CONTRACTOR BUCKEYE SEWER & DRAIN CELL PHONE # 419-700-0003
 DESCRIPTION OF WORK TO BE PERFORMED REPLACE 20' EXIST. SERVICE
W/CLEAN OUT
 ESTIMATED COMPLETION DATE 9-27-17 ESTIMATED COST _____

DESCRIPTION	FEE	TOTAL COST
Demo Permit	(100.3100.46690) \$100.00	\$
Fence	\$25.00	\$
Pool	\$25.00	\$
Garage and Shed Under 200 SF (Detached)	\$25.00	\$
Driveway	0	\$
Sidewalk/Curbing	0	\$
Sewer Outside	0	\$ 0
Subtotal:		\$
		\$
TOTAL FEE:		\$ 0

I FULLY UNDERSTAND THAT NO EXCAVATION, CONSTRUCTION OR STRUCTURAL ALTERATION, ELECTRICAL OR MECHANICAL INSTALLATION OR ALTERATION OF ANY BUILDING STRUCTURE, SIGN, OR PART THEREOF AND NO USE OF THE ABOVE SHALL BE UNDERTAKEN OR PERFORMED UNTIL THE PERMIT APPLIED FOR HEREIN HAS BEEN APPROVED AND ISSUED BY THE CITY OF NAPOLEON BUILDING/ZONING DEPARTMENT.

I hereby certify that I am the Owner of the named property, or that the proposed work is authorized by the Owner of record and that I have been authorized by the Owner to make this application as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for Work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

SIGNATURE OF APPLICANT: Donald E. Lafontaine DATE: 9/27/17

PRINT NAME: _____

BATCH # _____ CHECK # _____ DATE _____

APPLICATION FOR PERMIT TO TAP SEWER

(Print or Type)

Owner Esther D. Patterson
Address 1121 Ohio
Contractor Bob Peoples
Address RR# 4 Napoleon Tel. 758-316
NO. _____
BLDG. PERMIT _____
PERMIT FEE \$ _____
DATE PAID _____
for office use only

LOCATION OF CONNECTION
Street and No. 1121 Ohio Sanitary Storm _____
Lot No. 26 Subdivision 2nd Highland Size of Tap _____
Size and Type of Sewer 4" x 6" PVC

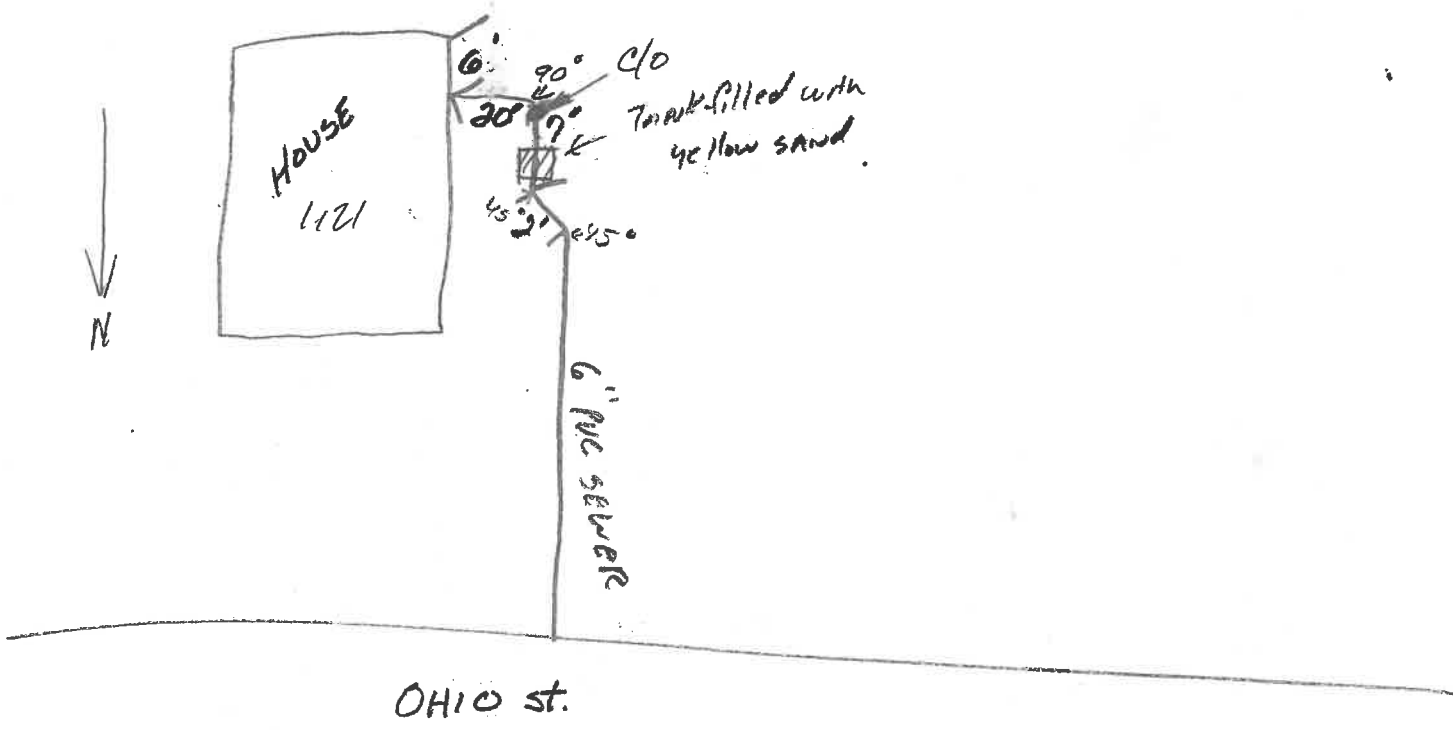
ALL WORK MUST BE INSPECTED
I certify that the sewer will be used only as indicated and no other Drainage will be connected.
Date June 1 57 Signature Esther D. Patterson
owner-builder agent
do not write below this line

INSPECTION RECORD

Date Inspected JUNE 1 1979 Size and Type of Sewer 4" PVC
Location WEST SIDE Depth 1' Type of Test N/A
Inspected and Approved By: Bruce Weirauch 6-1-79
Inspector Date
Additional Information FILLED SEPTIC TANK w/ STONE

Send copy to: ESTHER PATTERSON

SKETCH OF INSTALLATION



1122

1103

Ohio St.

1070

1121

1071

8" W.M.

4" W.M.

30" Stm.

8" San.

8" San.

4" W.M.

San.

4" PVC Cleanout 2.25' Deep
2' Deep
10" ORP Foundation

All Pipe was 4" SDR35 PVC
Sewer Pipe

A. D. D. I. M.
9-27-17



1121 Ohio St.

