

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01609 Issued 8-22-88
date

Job Location 130 Orchard Lane
address

Lot 13 Anthony Wayne Acres 2nd Add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Mike Russell 599-7015
name tel.

Address 130 Orchard Lane

Agent Alan Brown 762-5744
builder-eng.-etc. tel.

Address J-841 Rd. 18 Rt. #3
Napoleon, Ohio 43545

Description of Use Residence

Residential _____
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 35,000.00 - Bldg. & Elect.
30,000.00 - Plmb. & Htg.

ZONING INFORMATION

district S	lot dimensions 92' x 150'	area 18,675	front yd	side yds	rear yd
max hgt 35'	no pkg spaces 2 - min.	no ldg spaces	max cover 30%	petition or appeal req'd	
			date appr		

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	98.00	107.00
<input checked="" type="checkbox"/> ELECTRICAL	15.00	15.00	30.00
<input checked="" type="checkbox"/> PLUMBING	9.00	36.00	45.00
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> DEMOLITION			
<input checked="" type="checkbox"/> ZONING	5.00		5.00
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			187.00
LESS MIN. FEES PAID			112.00
BALANCE DUE.....			75.00

WORK INFORMATION: Existing

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: Add 5 new circuits, rewire first floor & change existing A panel.
brief description

Plumbing: 2 - bath, kitchen & laundry.
brief description

Mechanical: Apply for separately.
brief description

Sign: N.A. Dimensions _____ Sign Area _____
type

Additional Information: This permit covers remodeling of first floor only.

Apply for work to be done in the basement separately

Date 8/25/88 Applicant Signature Michael W. Russell owner-agent

CITY OF NAPOLEON
AUG 29 1988

PAID

INSPECTION RECORD

UNDERGROUND			ROUGH-IN						FINAL			
Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By	
PLUMBING	Building Drains		Drainage, Waste & Vent Piping	8/31	EH	Indirect Waste			Drainage, Waste & Vent Piping			
	Water Piping								Backflow Prevention			
	Building Sewer		Water Piping	8/31	EH	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	INSPECTIONS, CORRECTIONS, ETC.					INSPECTIONS, CORRECTIONS, ETC.						
	INSPECTION REQUESTED BY			12/7		EH						
	STERLING ADAMS											

RESIDENTIAL PLAN CORRECTION SHEET

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

ADDENDUM TO Permit No. 01609 - (1)
Owner MIKE RUSSELL
Contractor ALAN BROWN
Location 130 DECHARD 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.
	Submit fully dimensioned plot plan.		Ceiling joists undersized in _____.
	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.	<input checked="" type="checkbox"/>	Terminate all exhaust systems to outside air.
	Provide approved sheathing or flashing behind masonry veneer.	<input checked="" type="checkbox"/>	Insulate ducts in unheated areas.
	Provide min. 15# underlayment on roof.	<input checked="" type="checkbox"/>	Provide backflow prevention device on all hose bibs.
<input checked="" type="checkbox"/>	Provide adequate fireplace hearth.	<input checked="" type="checkbox"/>	Terminate pressure and temperature relief valve drain in an approved manner.
<input checked="" type="checkbox"/>	Install factory built fireplaces/stoves according to manufacturers instructions.		Provide dishwasher drain with approved air gap device.
<input checked="" type="checkbox"/>	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.
<input checked="" type="checkbox"/>	Provide mechanical exhaust or window in bathroom		Provide approved system of grounding and bonding.
	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".	<input checked="" type="checkbox"/>	Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.
	Min. size of footer _____" x _____".	<input checked="" type="checkbox"/>	Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.
	Provide anchor bolts, 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.	<input checked="" type="checkbox"/>	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.
<input checked="" type="checkbox"/>	Provide design data for structural member in <u>SUPPORTING FIRST FLOOR + ROOF</u>		Footers and Setbacks.
	Floor joists undersized in _____.		Building sewer.
	Provide double joists under parallel bearing partitions.	<input checked="" type="checkbox"/>	Foundation.
	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.	<input checked="" type="checkbox"/>	Plumbing rough-in.
	Show size of headers for openings over 4' wide _____.	<input checked="" type="checkbox"/>	Final Building other,
		<input checked="" type="checkbox"/>	Plumbing final.
		<input checked="" type="checkbox"/>	Electrical service.
		<input checked="" type="checkbox"/>	Electrical rough-in.
		<input checked="" type="checkbox"/>	Electrical final
			<u>BUILDING FRAMING</u>

Additional Corrections. * 2- SMOKE DETECTORS FIRST FLOOR 1- REQ. IN BASEMENT

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. 01609 and made a part thereof. DATE APPROVED OR DISAPPROVED 8-18-88 Checked by ELDON HUBER Plan Examiner.

DATE RECHECKED AND APPROVED

Checked by



PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01609 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. [redacted] Issued 8-18-88
 Job Location 130 ORCHARD LANE
 Lot 19 RUTHADY WAYNE ALRES 2ND ADD
 Issued By FH
 Owner MIKE ROSSEL 599-7015 OFF
 Address 130 ORCHARD LANE
 Agent FLAN BROWN 762-5749
 Address V-841 RD 1A RT #3
 Description of Use RESIDENCE

Residential 1
 Commercial _____ Industrial _____
 New _____ Add'n _____ Alter _____ Remodel X

Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ ~~15,000~~

BUILDING & ELEC 35,000.00
 PL & HT 30,000.00
ZONING INFORMATION

FEE	BASE	PLUS	TOTAL
BUILDING	9.00	98.00	107.00
ELECTRICAL	15.00	15.00	30.00
PLUMBING	9.00	36.00	45.00
MECHANICAL			
DEMOLITION			
ZONING	5.00	1.00	5.00
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			187.00
LESS MIN. FEES PAID _____ date			112.00
BALANCE DUE.....			75.00

district <u>5</u>	lot dimensions <u>92' x 150'</u>	area <u>18,675 S.F.</u>	front yd	side yds	rear yd
max hgt <u>35'</u>	no pkg spaces <u>2-MIN</u>	no ldg spaces	max cover <u>30%</u>	petition or appeal req'd	date appr

WORK INFORMATION: EXISTING

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: ADD 5-NEW CIRCUITS, REWIRE FIRST FLOOR + CHANGE EXISTING PANEL
 Plumbing: 2-BATH KITCHEN + LAUNDRY
 Mechanical: APPLY FOR SEPARATELY
 Sign: N.A. Dimensions _____ Sign Area _____

Additional Information: THIS PERMIT COVERS REMODELING OF FIRST FLOOR ONLY
APPLY FOR WORK TO BE DONE IN THE BASEMENT SEPARATELY
 Date _____ Applicant Signature _____
 owner-agent

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

The undersigned hereby makes application for construction, installation, or alteration 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 130 ORCHARD LN. Cost of project ~~\$15,000~~ \$35,000.00 **FIRST FLOOR**
Owner's Name MIKE RUSSEL Address 130 ORCHARD LN. Nap
Contractor Alan Brown Telephone No. 762-5744
Address J-841 Rd 18 R.3 Napoleon, OH 43541

Lot Information: (Not required for siding job)

Lot No. 19 Subdivision A.W. AC. 2ND ADD
Zoning District 5 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 T-11

Brief Description of Work: TURNING CHURCH INTO HOUSE (Specific Type)

Size: Length 80' 8" Width 48' No. of Stories 2
Area: 1st Floor 2,944 sq. ft. Basement 2,944 sq. ft.
2nd Floor sq. ft. Accessory Bldg. sq. ft.
3rd Floor sq. ft. Other sq. ft.

Additional Information: **FIRST FLOOR ONLY**
CHANGED OF OCCUPANCY FROM CHURCH TO RESIDENCE

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 AUGUST 16 1988 Applicant's Signature Alan Brown

PERMIT NO. _____
PERMIT FEE \$ _____

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

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

Owner's Name Mike Russell Address _____

Electrical Contractor Bostelman Elect Telephone No. 599-3416

Address 23 < Robbs Nap

General Contractor _____ Telephone No. _____

Address _____

Location of Project _____ Cost of Project _____

Work Information:

Residential _____ Commercial _____ Industrial _____

No. Units

New _____ Service Change _____ Rewiring _____ Additional Wiring 5 new circuit

Brief Description of Work: _____

Size of proposed service entrance _____ Number of new circuits 5

Type of proposed service entrance _____ Underground _____ Overhead _____

Require Temporary Electric _____ (Yes or No)

Total Floor Area - Commercial and Industrial only _____ sq. ft.

Additional Information: REPLACE EXISTING WITH NEW

PANEL

*Ground fault circuit interrupter protection is required on all 120-volt single phase, 15 and 20 amp. Circuits which are part of a temporary electric service; and also on bathroom, outdoor, and garage receptacles in all dwelling units. Art. 220-8 N.E.C.

Application for permit shall be accompanied by two complete sets of plans including: Electrical layout and riser diagram. (For commercial and industrial work only).

ate Aug 11, 1988

Applicant's Signature Norman P. Bostelman

PERMIT NO.

PERMIT FEE \$

BUILDING INSPECTION DEPARTMENT
 APPLICATION FOR PLUMBING PERMIT
 (Please print or type)

The undersigned hereby makes application for the installation or replacement of plumbing work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Codes. (1, 2 and 3 family dwelling units only).

Owner's Name Mike Russell Address 130 Orchard Lane
 Plumbing Contractor Van Deykens Plumbing Telephone No. 592-4256
 Address 116 E Clinton
 General Contractor Alan Brown Telephone no. _____
 Address 130 ORCHARD LANE
 Location of Project _____ Cost of Project 30,000.00

Work Information:

No. of dwelling units 1 New _____ Replacement Addition _____

Brief description of work: REMODEL EXISTING CHURCH 1070 RESIDENCE

Is water tap required _____ Size _____ Type of Pipe CPVC
 Is sewer tap required _____ Size _____ Type of Pipe PVC

Type of Water Distribution pipe _____
 Type of Drainage, Waste and Vent Pipe _____

Size of main building drain 4 Size of main vent pipe 4

Water closets 2 Bathtubs 1 1 1/2 Shower 1 1 1/2
 No. Trap Size No. Trap Size

Lavatories 3 1 1/2 Kitchen Sink 1 1 1/2 Disposal 1 1 1/2
 No. Trap Size No. Trap Size No. Trap Size

Dishwasher 1 Clothes Washer 2 2 Other 1 1 1/2
 No. Trap Size No. Trap Size No. Trap Size

All installations are subject to plumbing tests and/or inspections.

Date Aug 17 1988 Applicant's Signature Daniel J. Westfall
Van Deykens Plumbing

12 - TRAPS

PERMIT NO. _____
 PERMIT FEE \$ _____

PL & HW'S

CAUTION

