B SPECTION RECORD PERMIT-

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

-0.5	01322 _{Issu}	date 3-11-87	-		FEES	BASE \$6.00	PLUS \$39.75	TOTAL \$45.75
Job Location	419 S. Perry	address	- 1	BUIL	DING	φονου	φορ. ()	Ψ=0.+12
			- \$	ELEC	CTRICAL	\$10.00	\$8.00	\$18.00
	building official		- 🕸	PLUI	MBING	\$6.00	\$10.00	\$16.00
Owner Walt	name	592 – 7741 tel.	- 4	MEC	HANICAL			Squad
	S. Perry	F00 #0F7	-	DEM	OLITION	united in	lian e	rghthiat
Agent	nis Damman, Build Ider-engetc.	tel.			-	:000		SHARL
	75 Rd 13 A R-6	Sudan	a T	ZON	ING	e Sug		100
Description of	f Use Residence	(a) this surp	- 9	SIGN	1	15976		minage E
	4v0H99A	TO SELECT	V	WATER	RTAP	(slues)		2
Residential	no. dwelling units	tarber D sugans		SEWER	TAP	210019		
Commercial_	THE RESERVE SHAPE OF THE PERSON OF THE PERSO	ial				Chara	- A 43	bried
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	at 6 12 250 00							
Estimated Co	St \$ 12,200.00	TO BUILDING TO		LEC	CO MINI EE	EC DAID		
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WORK INFORMATION:			Supports	MAR 2 0 1987
Size: Length	Width	Stories	Ground Floor A	city of Napoleon
Height	Building Vo	olume (for demo. permit)	Sharkm(a)	cu. ft.
Electrical: Re-wire ne			Tours.	
Plumbing: New kitche	n, bath & lau	rief description Indry rief description	TONS, CORRECTION)39ani
Mechanical:		rief description		
Sign:		ner description	Sign Area	
Additional Information:		oom, kitchen, bathr	oom & laundry add	closet. Existing
garage becomes la	undry-utility	room and storage o	closet	
0 00		gnature Pennis	E. Hamana	
Date 3-20-87	Applicant Signature	anature Plants	LE DUSTLENTY CA	

INSPECTION RECORD

FINAL **ROUGH-IN UNDERGROUND** Date By Date By Type Type Date By Type Date By Type Drainage, Waste & Vent Piping Drainage, Waste & Vent Piping Indirect Building Waste Drains Backflow KITCH BD ONLY PLUMBING Water Prevention BATH, Piping Water Condensate Water No Building Heater Lines Piping TEST Sewer **FINAL** Sewer APPROVAL Connection **Grease Exhaust** Chimney(s) Refrigerant Refrigerant System Piping Piping Air Cond. Fire Duct MECHANICAL Unit(s) **Dampers** Furnace(s) ☐ Radiant Htr(s)☐ Unit Htr(s) Refrigeration Ducts/ Ducts/ Equipment **Plenums** Plenums Furnace(s) Pool Duct Heater Insulation FINAL Ventilation Combustion APPROVAL □ Supply □ Exhst. **Products Vents** Temp Service Temp Lighting □ Range Conduits/ Conduits & □ Dryer Cable or Cable **Fixtures** ☐ Generator(s) Grounding & Rough Lampholders ELECTRICAL □ Motors or Bonding Wiring Signs □ Water Htr Service Panel Floor Ducts □ Welder Switchboard Raceways Electric Mtr. □ Heaters Busways Service □ Heat Cable Clearance **Ducts** Conduit FINAL APPROVAL □ Duct Htr(s) Subpanels Temporary Power Pole □ Furnace(s) **Roof Covering** Smoke **Exterior Wall** Location, Set-Detector Roof Drainage Construction backs, Esmt(s) Demolition Exterior Lath Excavation (sewer cap) ☐ Interior Lath Footings & □ Wallboard Reinforcing BUILDING Fire Wall(s) **Building** or Interior Wall Floor Structure Construction Slab Fireplace Foundation : Columns & Chimney Supports Attic Sub-soil Drain Crawl Space □ Vent □ Access □ Vent □ Access FINAL APPROVAL Floor Piles BLDG. DEPT. System(s) Certificate of Special Insp Roof Occupancy Issued Reports Rec'd System INSPECTIONS, CORRECTIONS, ETC. INSPECTIONS, CORRECTIONS, ETC. ADDITIONAL - 1-2 THINK TO

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RESIDENTIAL PLAN CORRECTION SHEET

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

ADDENDUM TO PETRIC NO. 0/322 Owner 4/40 TRAUNING Contractor OEXNIS ORMARN Location 4/95, PERRY

YET ISSUED, CORRECT PLANS AND RE-SUBMIT. SPERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

_	THE THE POSITION OF THE PROPERTY OF	SSUED,	INCORPORATE ITEMS DURI	NG	CONSTRUCTION.
_	GENERAL		Show size of members :	supp	porting porch roof.
	Provide approved smcke detector(s) as req'd. Provide 3 gypsum wallboard between	X	Provide double top pla partitions and exterio	ate	for all bearing
	dwelling and garage, on garage side.		Provide design data fo	or j	orefab wood truss.
	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)		Ceiling joists unders:		
-	Submit fully dimensioned plot plan.		Roof rafters undersize	ed :	n
			PLUMBING AND) MI	CHANICAL
	Provide min. of 1-3'0" x 6'8" exit door. Provide min. 22" x 30" attic access opening.	X	Terminate all exhaust		
\triangle	Provide min. 18" x 24" crawl space access		Insulate ducts in unh		
X	opening.		Provide backflow prevence bibs.	ent	ion device on all
	Provide approved sheathing or flashing behind masonry veneer.		Terminate pressure and valve drain in an appr	3 te	emperature relief
_	Provide min. 15# underlayment on roof.				
-	Provide adequate fireplace hearth.		Provide dishwasher dra gap device.	arn	with approved air
	Install factory built fireplaces/stoves according to manufacturers instructions.		METAL '	JENI	EERS
	Terminate chimney 2' above roof or 2' above highest point of building within		Contact City Utilities conductors and/or meter	De	ept. to remove
	10' of chimney.		Provide approved system	em (of grounding and
	LIGHT AND VENTILATION		ELECT	RIC	AT.
	Provide mechanical exhaust or window in bathroom		Show location of serv:	ice	entrance panel
	Provide min. 132 Sq. In. net free	-	and service equipment		
-	area attic ventilation.		G. F. C. I. req'd. on		
X	Provide min. 32 Sq. In. net free area crawl space ventilation.	X	Outdoor, bathroom and shall be protected by	G.	F. C. I. NOTE
	FOUNDATION		Maximum number of reconn a G. F. C. I. circu	pti	cles permitted
X	Min. depth of foundationbelow finished grade is 32".		20 A. circuits and 7	for	15A. circuits.
	Min. size of footer "x".		Refrigerators, microwa furnace and air condit	ives	, washers, disposal
1	Provide anchor bolts 5" 8 6' o.c. 1' from		separate circuits.	. 10,	iers swarr be on
X	each corner. Embedded 7" in concrete and 15" in masonry.		INSPEC		
	Show size of basement columns.	1	The following indicate required. The owner or	9 1	nspections are
	FRAMING		Contact the City Build	ina	Dept. at least
	Show size of wood girder in		24 hrs prior to the ti is to be made:	me	the inspection
	Provide design data for structural member in	\times	Footers and Setbacks.		Building sewer.
	Floor joists undersized in	\times	Foundation.		HVAC rough-in.
	Provide double joists under parallel	X	Plumbing rough-in.	×	Final Building
	bearing partitions.		Plumbing final.		other,
	Provide 1" x 4" let in corner bracing,		Electrical service.		
_	approved sheathing, or equal.	1	Electrical rough-in.		
	Show size of headers for openings over 4° wide	×	Electrical final	-	
n	Additional Corrections. KITCHEN RECE	PTICA	CS WITHIN 6-	011	OF THE SINK

Show size of headers for openings over

4' wide

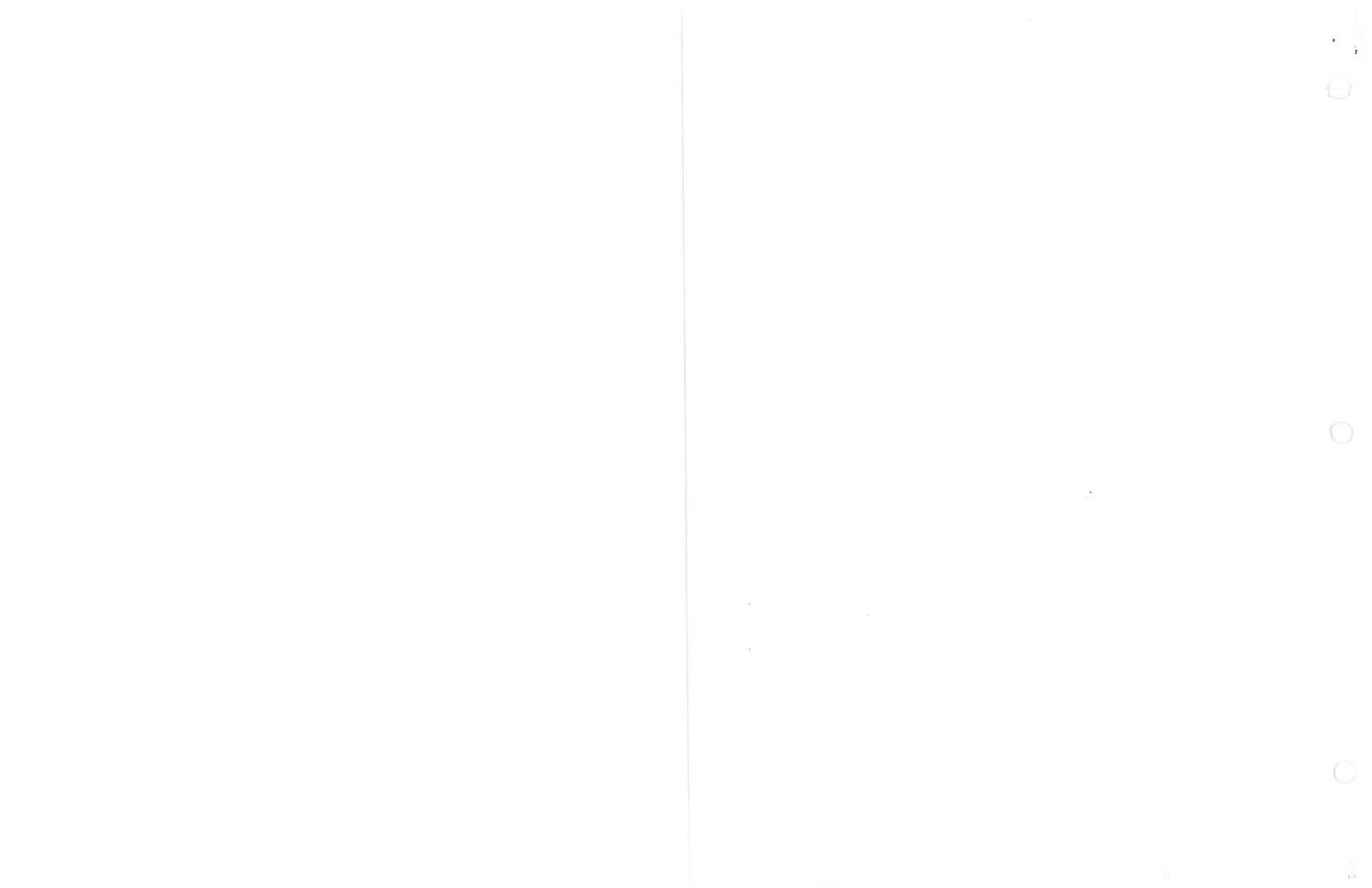
Additional Corrections. KITCHEN RECEPTICALS WITHIN 6'0" OF THE SINIC AND ABOUE THE COUNTER SHACE BE GROUND FAULT, FLOOIR 10/575 MIN 2x 6 @ 16"O.C. STUDS MIN 2x 45@ 16"O.C.

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.0/322 and made a part there-of. DATE APPROVED OR DISAPPROVED 3-1/-87 Checked by

DATE RECHECKED AND APPROVED Checked by

Checked by

Checked by



SECTION 13 S.E WIZ

SOUTH THIRD

PERMIT

01		TY OF NAPOLEO						
01-	255 West	Riverview Avenue,	, Napo	leon, Ohio	43545 -	419-592-4010		
Permit No.	lss	ued 3-1/-8	2/	- 1	FEES	BASE	PLUS	TOTAL
Job Location	419 SI PERI		V E	BUILDING		6,00	39,75	45,75
Lot 4	601-615 -2	address -	_ 4	ELEC	TRICAL	10,00	8,00	18.00
Issued By	building official		- d	PLUM	BING	6,00	10,00	16.00
	name 9 S. PERR	tel.	<u>-</u> 4	MECH	IANICAL			
	Agent DENNIS DAMMAN BUILDEN			DEMO	DLITION	-		
builder-engetc. tel. Address R-F7 RD 13 A R-6			- +	ZONII	NG	-		
Description of	fUse_RESIDEA	VCE	- 🕇	SIGN				
			_	WATER	TAP			
Residentialno. dwelling units			-	SEWER	TAP	-		
Commercial_	Industr	rial	-	TEMP. E	LECT			
NewA	dd'nAlter	Remodel_X			IONAL	3-COPY Struct.	5	175
Mixed Occupa	ancy		_		AN	Struct.	nrs _	
Change of Oc	•		_	REVIEW Elect hrs				
	• • • • • • • • • • • • • • • • • • • •	00	-	TOTAL FEES.				
estimated Co	st \$ 12,250	1	-	LESS MIN. FEES PAID				
						da		
	ZONING INFORMA	TION DIA	Ĺ	BALA	ANCE DU	E	• • • • • • • • • • • • • • • • • • • •	
district G.B.	lot dimensions	area		front	yd	side ýds		rear yd
max hgt	no pkg spaces	no ldg spaces	max	x cover	petition	or appeal req'd		date appr
ORK INFOR	MATION:	*1	-		=		office of supplying provided coming as a	
lize: Length_	Width	1S	tories		Grou	nd Floor Area		
Height_	Build	ding Volume (for o	demo.	permit)				cu. ft
lectrical: 🔣	E-WIRR NEW	W KITCHEN	X)	EATH	4-0	IP.		
······································	W KITCHE	brief descriptio	on C	IDNORY				3
rechanical:		brief descriptio						
ign:	Dimen	sions			Si	an Area		
type dditional Info	ermation: LEM	DATE TEF	DO	one -	E1711	ED THE	III bana.	200
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BM, 19	COSET - PORA	16/ CCOSE	6AX	ZAGE	BECO.	LAI CAL	WORY -	UTICITY
ate	Applic	ant Signature	- •					,
					ow	ner-agent		
White-Building	g Department "Yellow-A	oplicant Pink-Elect	rical Ins	spector	Green-Clerk	-Treasurer Go	old-County Aug	ditor

	yr.

CITY OF NAPOLEON 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 Walt Panning	Address 419 S. Perry
Plumbing Contractor	Telephone No. 592- 774/
Address General Contractor Dennis Pamman Builder Address P-475 Rd 13A R-6	Telephone No. 592-3957
1110 00	Cost of Project 3,000.
Work Information:	ਸ਼ ਸ਼ ਸ਼
No. of dwelling units New Replacement Brief description of work: install new lo	Addition PERMIT NO.
Is water tap required Size Type o	of Pipe
Is sewer tap required Size Type o	of Pipe
Type of Water Distribution pipe	
Type of Drainage, Waste and Vent Pipe	
Size of main building drain Size of	main vent pipe 3"
	Shower No. Trap Size
Lavatories / No. Trap Size Kitchen Sink / Trap Size	Disposal No. Trap Size
Oishwasher Clothes Washer No. Trap Size	Do Size Other No. Trap Size
All installations are subject to plumbing tests and/or insp	
Date 3-7-87 Applicant's Signature	Dennis E. Damman

OWNER 597-7741

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 Walt Electrical Contractor Telephone No. Address Telephone No. 592-375 General Contractor Cost of Project 4 Location of Project Work Information: Residential Commercial Industrial Additional Wiring Service Change Brief Description of Work: Mistall Size of proposed service entrance Number of new circuits Type of proposed service entrance Underground Overhead Require Temporary Electric (Yes or No) Total Floor Area - Commercial and Industrial only Additional Information: *Ground fault circuit interrupter protection is required on all 120-volt single phase, \$5 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). Applicant's Signature

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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 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	19 5 Per	ry	Cost of	projec	t 12,25	0,00
Owner's Name Walt	Panning	Addr	ess			
Contractor Donnis &	Janman B	uilder Tele	phone N	0.59	2-395	7
Address						—— പ
Lot Information: (Not	required for	siding job)				PERMIT
Lot No.	Subdivision_					
Zoning District	Lot Size	ft. X	ft.	Area	sq.	ft.
Setbacks: Front	Right Side	Left	Side		Rear	
Work Information:						
Residential	Commer	cial		Industr	rial	
New Construction	Additi	on		Remodel		
Accessory Building		Siding_				
Brief Description of Wo	ork:		(S	pecific	Type)	PE
•	-					PERMIT
Size: Length	Width	No. of St	ories_			
Area: 1st Floor	sq. ft.	Basement			sq. ft.	Ś
2nd Floor	sq. ft.	Accessor	y Bldg.	_	sq. ft.	
3rd Floor	sq. ft.	Other			_sq. ft.	
Additional Information						
APPLICATION FOR PERMIT INCLUDING: ELEVATIONS ADDITION OR REMODELING LOCATION. ALL PLANS SE	, FLOOR PLANS, , SHOW ALL EXI	CROSS SECT	TIONS AN	ID PLOT	PLAN. IF	
Date	Applican	t's Signatu	ire			- T

