



HENRY COUNTY DEPARTMENT OF HEALTH

COURTHOUSE
NAPOLEON, OHIO 43545
Phone: 599-5545

August 5, 1988

City of Napoleon
Napoleon,
Ohio

To Whom It May Concern:

There was no evidence of rodent or insect infestation found at the site of Roy's Body Shop located at 360 East Riverview Avenue and you have our permission to issue a demolition permit.

Thank you.

Sincerely,

A handwritten signature in cursive script that reads "J. E. Holtsberry". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".

James Holtsberry, R.S.
Sanitarian
Henry County Health Department

JH:slg

PERMIT

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

Permit No. 01601 Issued 8-8-88
date

Job Location 360 E. Riverview
address

Lot 37,38,39 J. Stouts 1st Add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Roy Kistner
name tel.

Address 510 Haley

Agent Webb Bros. Excav.
builder-eng.-etc. tel.

Address _____

Description of Use Residence

Residential _____
no. dwelling units

Commercial Industrial _____
 Demolition _____
 New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 2,500.00

FEE	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<input checked="" type="checkbox"/> DEMOLITION	10.00	20.00	30.00
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			30.00
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
I1					
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION:

Size: Length 70' Width 50' Stories _____ Ground Floor Area 3,500
 Height 14' Building Volume (for demo. permit) 49,000 cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____

Additional Information: Demolish existing Roy's Body Shop building.
Shop portion of building.

Date 8-5-88 Applicant Signature [Signature] owner-agent

PAID

AUG 05 1988

CITY OF NAPOLEON

Addendum No. 1 to
Demolition Permit No. _____

This Permit is granted with the condition that any hazardous material including but not limited to toxic chemicals and asbestos which may be encountered by the contractor during the course of demolishing the building described on the above referenced permit must be removed and disposed of in a manner prescribed by the Ohio E.P.A., as described in Appendix C of the U.S.E.P.A. Nation Emission Standards For Hazardous Air Pollutants (N.E.S.H.A.P.S.) Asbestos Regulations (40 CFR61 subpart M) and the applicable O.S.H.A. Regulations.

Further that the removal of any such material be completed by a contractor who is licensed by the Ohio Department of Health in a manner prescribed by the Ohio E.P.A. which will contain any such materials encountered within the confines of the building being demolished until said material can be put into E.P.A. approved containers for transportation to a disposal site.

Disposal of said hazardous materials shall be at a site licensed by the Ohio E.P.A. to receive and store or dispose of the specific material in question.

Any such materials which are to be stored at an approved site shall be contained in a manner and in such containers as are approved by the Governing Regulatory Agency and the Ohio E.P.A.

Upon encountering such material the contractor must notify the owner of the property, the Ohio E.P.A. and the City of Napoleon Building Department and advise them of precisely which materials have been encountered, the procedure which will be used to dispose of the material, the contractor who will do the work and the disposal site.

Certificates of approval or copies of current licenses issued to the contractors and to disposal sites shall be submitted to the City of Napoleon Building Department for review.

The Contractor shall answer the following questions:

YES ~~NO~~-A. An inspection of the building has revealed that hazardous materials are present.

YES NO-B. Laboratory testing of samples of suspect materials revealed that hazardous materials are present.

If the answer to question B. is Yes, describe the hazardous materials which were found to be present.

If the answer to question B is Yes, fill in the information listed below, for the licensed contractor who will remove the hazardous material, and submit a copy of the contractors license.

License No. _____

Expiration Date _____

Name of Company _____

Address _____

Phone No. _____

Owner or C.E.O. _____

If the answer to question B is yes, fill in the following information for the disposal site and submit a copy of the sites license.

License No. _____

Expiration Date _____

Name of Company _____

Address _____


Phone No. _____

Owner of C.E.O. _____

This addendum becomes part of the above referenced permit and modifies it only to the extent herein set forth.

Received and accepted by

8-10-88
Date


Signature of applicant as a condition of granting the permit

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

01601 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. Issued 8-8-88
date

Job Location 360 E. RIVERVIEW
address

Lot 3738 V. 570071 1ST ADD
sub-div or legal descripr

Issued By 54
building official

Owner ROY KISTNER
name tel

Address 510 HALLEY

Agent WEBB BROS EXCAV.
builder-eng-etc tel

Address

Description of Use RESIDENCE

Residential
no dwelling units

Commercial X Industrial
DEMOLITION

New Add'n. Alter Remodel

Mixed Occupancy

Change of Occupancy

Estimated Cost \$ 2500

FEE	BASE	PLUS	TOTAL
BUILDING			
ELECTRICAL			
PLUMBING			
MECHANICAL			
<input checked="" type="checkbox"/> DEMOLITION	10.00	20.00	30.00
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. <u> </u> hrs		
	Elect. <u> </u> hrs		
TOTAL FEES.....			30.00
LESS MIN. FEES PAID <u> </u>			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
I 1					
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION:

Size: Length 70' Width 50' Stories Ground Floor Area 3500
 Height 14' Building Volume (for demo. permit) 49,000 cu. ft.

Electrical:
brief description

Plumbing:
brief description

Mechanical:
brief description

Sign: Dimensions Sign Area
type

Additional Information: DEMOLITION EXISTING ROY'S BODY SHOP BUILDING SHOP PORTION OF BUILDING

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.

Home 599-3596

Location of project 360 E. Riverview Cost of project 250000

Owner's Name Ray Kistner Address 510 Haley Napoleon

Contractor Larry Irving Telephone No. _____

Address John Webb

Lot Information: (Not required for siding job)

Lot No. Part of 37-38-39 Subdivision J Stout's 1st Addition

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 _____ (Specific Type)

Brief Description of Work:-----

Size: Length 70 Width 50 No. of Stories 1 1/2

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Bldg. _____ sq. ft.

3rd Floor _____ sq. ft. Other _____ sq. ft.

Additional Information: 49,000

PERMIT NO.

PERMIT FEE \$

30.00

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 8-5-88 Applicant's Signature Ray Kistner