

P E R M I T

CITY OF NAPOLEON
255 W. RIVERVIEW AVE
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING
PH (419) 592-4010
FAX (419) 599-8393

PERMIT NO: 97128

DATE ISSUED: 05-01-97

ISSUED BY: BND

JOB LOCATION: 525 W RIVERVIEW AVE

EST. COST: 49000.00

LOT #: 4

SUBDIVISION NAME: CANAL LANDS SUB

OWNER: KELLER, KEITH
ADDRESS: 170 WAYNE PARK DR
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-8481

AGENT: GERMANN BUILDERS
ADDRESS: 970 OAKWOOD AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-1806

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: C-1 LOT DIM: IRR AREA: 20854 FYRD: 25 SYRD: 7 RYRD: 15
MAX HT: 60 # PKG SPACES: 2 # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

WORK TYPE - NEW: X REPLMNT: ADD'N: ALTER: REMODEL:

WORK INFORMATION

SIZE - LGTH: 32 WIDTH: 30 STORIES: 2 LIVING AREA SF: 960
PAGE AREA SF: 960 HEIGHT: 19 BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
NEW HOME

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
BUILDING PERMIT		135.00
ELECTRICAL PERMIT		75.00
PLUMBING PERMIT		33.00
MECHANICAL PERMIT		18.00
WATER TAP PERMIT		655.00
SEWER PERMIT		312.00

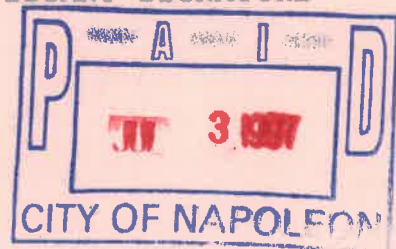
TOTAL FEES DUE 1228.00

7-3-97

DATE

Eric Peronera

APPLICANT SIGNATURE



CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 97128

ISSUED:05-01-97

JOB LOCATION: 525 W RIVERVIEW AVE

WORK DESCRIPTION: NEW HOME

OWNER: KELLER, KEITH

ADDRESS: 170 WAYNE PARK DR NAPOLEON, OH 43545

OWNER PHONE: 419-592-8481

CONTRACTOR: GERMANN BLDRS

ADDRESS: 970 OAKWOOD AVE NAPOLEON, OHIO 43545

CONTRACTOR PHONE: 419-592-1806

ELECTRIC SERVICE UPGRADE _____ NEW SERVICE INSTALLATION X

INDUSTRIAL _____ COMMERCIAL _____ RESIDENTIAL X 1PHASE _____ 3PHASE _____

SIZE OF SERVICE 100AMP _____ 150AMP _____ 200AMP Y 400AMP _____ OTHER _____

HUB SIZE - 1 1/4" _____ 1 1/2" _____ 2" _____

DESIRED VOLTAGE 120/240 X OTHER _____

UNDERGROUND SERVICE X OVERHEAD SERVICE _____

=====

DATE COMPLETED: _____ APPROVED BY: _____

OLD METER NUMBER: _____ NEW METER NUMBER: _____

COMMENTS:

CITY OF NAPOLEON

WATER METER YOKE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" WATER METER YOKE ASSEMBLY
(Please pickup at City Operations Department 1775 Industrial Drive).

PERMIT #: 97128

ISSUED: 05-01-97

JOB LOCATION: 525 W RIVERVIEW AVE

OWNER: KELLER, KEITH

PHONE: 419-592-8481

ADDRESS: 170 WAYNE PARK DR NAPOLEON, OH 43545

CONTRACTOR: GERMANN BLDRS

ADDRESS: 970 OAKWOOD AVE NAPOLEON, OHIO 43545

PHONE: 419-592-1806

WATER TAP SIZE 1" 1.5" _____ 2" _____ OTHER _____

WATER METER YOKE SIZE 5/8" 3/4" _____ 1" _____ OTHER _____

NEW STRUCTURE EXISTING STRUCTURE _____ LAWN METER _____

WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING
OF 1" MINIMUM SIZE.

BACKFLOW DEVICE REQUIRED YES _____ NO

TYPE OF BACKFLOW DEVICE REQUIRED _____

WATER METER YOKE INSTALLATION IS SUBJECT TO THE FOLLOWING CONDITIONS

- 1.) MUST BE LOCATED IN AN ACCESSIBLE AREA.
- 2.) MUST BE IN AN AREA WHICH IS NOT SUBJECT TO FREEZING TEMPERATURES.
- 3.) MUST BE AT LEAST 18" ABOVE FLOOR LEVEL (NO CRAWL SPACE INSTALLATIONS).
- 4.) MUST COMPLY WITH MINIMUM MOUNTING REQUIREMENTS (DRAWING AVAILABLE)

ISSUED BY _____ RECEIVED BY _____

1-Copy to: Building Dept, Water Dept, and Utilities Dept

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 97128

DATE ISSUED: 05-01-97

JOB LOCATION: 525 W RIVERVIEW AVE

OWNER: KELLER, KEITH

OWNER PHONE: 419-592-8481

CONTRACTOR: GERMANN BLDRS

CONTRACTOR PHONE: 419-592-1806

WORK DESCRIPTION: NEW HOME

PLUMBING: UNDGR 7-1-97 RGHIN 8-20-97 FINAL _____

SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____

FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____

SERV UPGR _____

BUILDING: SITE 7-1-97 FTG 7-4-97 FNDDT 7-9-97

STRUC 8-20-97 ROOF 8-20-97 EXT 8-20-97

VENT _____ ACCES _____ EGRS _____

SMKDT _____ FINAL _____

ISSUE TEMP OCCUP _____ ISSUE OCCUP _____

STRG SHED: SITE _____ FINAL _____

SIGN: FTG _____ FINAL _____

FENCE: SITE _____ FINAL _____

MISC INSP: _____

NOTES: _____

INSPECTOR INITIALS: _____