

PERMIT
CITY OF NAPOLEON - BUILDING DEPARTMENT

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

Permit No. 02185 Issued 1-10-91
date

Job Location 654 Riverview
address

Lot 8&9 Hague & Ruffs Addition
sub-div or legal discript

Issued By Brent N. Damman
building official

Owner Hal Luebker 592-9852
name tel.

Address 14-333 Co. Rd. M-3

Agent Jim Speiser & Sons 599-1846
builder-eng.-etc. tel.

Address 0-199 Co. Rd. 16 R.2
Napoleon, Ohio 43545

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel XX

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 700.00

ZONING INFORMATION

| | | | | | |
|-----------------------|-------------------------------|---------------|-------------------------|--------------------------|----------------------|
| district B | lot dimensions N/A | area | front yd 25 | side yds 5 | rear yd 15 |
| max hgt 35' | no pkg spaces 2 per | no ldg spaces | max cover 45% | petition or appeal req'd | date appr |

WORK INFORMATION:

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

Electrical: New 100-A Service
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: _____

Date 1-10-91 Applicant Signature John Speiser By BWD **JAN 14 1991**
owner-agent

| FEE | BASE | PLUS | TOTAL |
|---|---|------|--------------|
| <input type="checkbox"/> BUILDING | | | |
| <input checked="" type="checkbox"/> ELECTRICAL | 15.00 | 6.00 | 21.00 |
| <input type="checkbox"/> PLUMBING | | | |
| <input type="checkbox"/> MECHANICAL | | | |
| <input type="checkbox"/> DEMOLITION | | | |
| <input type="checkbox"/> ZONING | | | |
| <input type="checkbox"/> SIGN | | | |
| <input type="checkbox"/> WATER TAP | | | |
| SEW. INSP. | | | |
| SEWER TAP | | | |
| TEMP. WATER | | | |
| TEMP. ELECT. | | | |
| ADDITIONAL PLAN REVIEW | Struct. _____ hrs _____ Elect. _____ hrs _____ | | |
| TOTAL FEES..... | | | 21.00 |
| LESS MIN. FEES PAID <u>1-14-91</u> <small>date</small> | | | 21.00 |
| BALANCE DUE..... | | | 00 |

paid in full 1-14-91
cash

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 | | | Indirect Waste | | | Drainage, Waste & Vent Piping | | |
| | Water Piping | | | | | | | | | Backflow Prevention | | |
| | Building Sewer | | | Water Piping | | | 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 | | 1/14 B.D |
| 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. | | | | | |
| | | | | | | | | | | | | |
| | PAID | | | | | | | | | | | |
| | JAN 14 1991 | | | | | | | | | | | |
| | CITY OF WASHINGTON | | | | | | | | | | | |

APPLICATION
for
RESIDENTIAL BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, PERMITS and DEMOLITION PERMIT
from the
CITY OF NAPOLEON - BUILDING DEPARTMENT
255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 419-592-4010

Entry No. 02185

Permit No. 0057-90 Issued 1-10-91

Job Location 654 RIVERVIEW

Lot 819 Hague + Raft's add
sub-div. or legal disc.

Issued By _____
building official

Owner HAL LUBNER Pn 592-9852

Address 14-333 Co Rd M-3

Agent Jim Speiser + Sons Pn 599-1846

Address 0-199 Co. Rd. 16 R2 Napoleon, Ohio

Description of Use Residence

| Ck. Permits Reg. | Base | Fees Plus | Total |
|------------------------|------------------|------------------|----------|
| Building | | | |
| X Electrical | 15.00 | 6.00 | 21.00 |
| Plumbing | | | |
| Mechanical | | | |
| Demolition | | | |
| Zoning | | | |
| Sign | | | |
| Water tap | | | |
| Sewer Tap | | | |
| Temp. Water | | | |
| Temp. Elec. | | | |
| Additional plan review | struc. _____ hrs | Elect. _____ hrs | |
| Total Fees | | | 21.00 |
| Less Min. Fees Pd. | | | |
| Balance Due | | | \$ 21.00 |

Residential 1 no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ _____

-ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds. | rear yd |
|------------|----------------|---------------|------------|---------------------------|-----------|
| <u>B</u> | <u>N/A</u> | | <u>25</u> | <u>5</u> | <u>15</u> |
| max hgt | no pkg spaces | no Idg spaces | max cover | petition or appeal req'd. | date appr |
| <u>35'</u> | <u>2 per</u> | | <u>45%</u> | | |

WORK INFORMATION:

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

Description of Work: _____

ELECTRICAL: Electrical Contractor Jim Spitzer & Son's Pn. 599-1846
 Address PO Box 545 Estimated Cost \$ 700⁰⁰
 Type of work: New Service change Rewiring Additional Wiring No Temp. Elec. Req.
 Size of service 100 Underground Overhead No. of new circuits 2
 Description of work: NEW 100 A SERVICE

PLUMBING: Plumbing Contractor _____ Pn. _____
 Address _____ Estimated Cost \$ _____
 Water Tap Req. Size _____ Type of Pipe _____ Water Dist. Pipe _____ type
 San. Sewer Tap Req. Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____ type
 St. Sewer Tap Req. Size _____ Type of Pipe _____ Street to be Opened _____ yes no
 Main Building Drain Size _____ Main Vent Pipe Size _____ List Number of Plumbing Fixtures Below
 Water Closets _____ Bathtubs _____ Showers _____ Lavatories _____ Kitchen Sinks _____ Disposal _____ Dishwasher _____ Clothes Washer _____
 Floor Drains _____ Other Fixtures: Type _____ No. _____
 Description of Work: _____

MECHANICAL: Mechanical Contractor _____ Pn. _____
 Address _____ Estimated Cost _____
 Heating System: Forced Air _____ Gravity _____ Hot Water _____ Steam _____ Unit Heaters _____ Radiant _____ Baseboard _____
 Type of Fuel: Electric _____ Natural Gas _____ Propane _____ Wood _____ Coal _____ Solar _____ Geothermal _____ Other _____
 No. of Heat Zones _____ Hot Water: (One Pipe _____ Two Pipe _____ Series Loop _____) Electric Heat: (No of Circuits _____) No. of Furnaces _____
 No. of Hot Air Runs _____ No. of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____
 Location of Heating Units: Crawl Space _____ Floor Level _____ Attic _____ Suspended _____ Roof _____ Outside _____ Other _____
 Description of Work _____

DRAWINGS REQUIRED: All Applications must be Accompanied by Two Complete sets of Drawings Including SITE PLAN, FOUNDATION PLAN, FLOOR PLANS, STRUCTURAL FRAMING PLANS, EXTERIOR ELEVATIONS, SECTIONS and DETAILS, STAIR DETAILS, ELECTRICAL LAYOUT, PLUMBING ISOMETRIC, HEATING LAYOUT ETC. All plans shall be DRAWN TO SCALE. Show all existing structures on the site plan also, show Electric Panel and Furnace Locations.

READ AND SIGN BELOW; The undersigned hereby makes application for a permit for all work described herein, and agrees to complete the work in strict accordance with all applicable provisions of the current edition of the C.A.B.O. Building Code, the Napoleon Building and Zoning Codes, the Napoleon Engineering Dept. Rules and Regulations, Standard Specifications and other Pertinent Sections of the Napoleon Code of Ordinances.

Date 1-9-91 Signature of Applicant John Spitzer
 Application not valid without signature