

**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**

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

Permit No. 01499 Issued 1-4-88  
date

Job Location 674 W. Riverview  
address

Lot 10 Hague & Raffe's Add.  
sub-div or legal discript

Issued By Eldon Huber  
building official

Owner E.W. Lanzer  
name tel.

Address 674 W. Riverview

Agent Bartels Electric 599-2992  
builder-eng.-etc. tel.

Address 13-414 Co. Rd. S

Description of Use Residence

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Residential 1  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel X

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 500.00

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

**ZONING INFORMATION N.A.**

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

**WORK INFORMATION: N.A.**

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

Height \_\_\_\_\_ Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Electrical: Replace existing with new 100 amp overhead service.  
brief description

Plumbing: N.A.  
brief description

Mechanical: N.A.  
brief description

Sign: N.A. Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
type

Additional Information: \_\_\_\_\_

Date 12-31-87 Applicant Signature John D. Swearingen  
owner/agent

**PAID**  
**JAN 04 1988**

# INSPECTION RECORD

| UNDERGROUND       |                                       |             | ROUGH-IN   |      |                            |   |      |                                 | FINAL                         |      |    |
|-------------------|---------------------------------------|-------------|--|------|----------------------------|---|------|---------------------------------|-------------------------------|------|----|
| Type              | Date                                  | By          | Type   | Date | By                         | Type  | Date | By                              | Type                          | Date | By |
| <b>PLUMBING</b>   | 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                |      |    |
| <b>MECHANICAL</b> | 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)<br><input type="checkbox"/> Unit Htr(s) |      |                                 | Refrigeration Equipment       |      |    |
|                   |                                       |             | Duct Insulation  |      |                            | Pool Heater   |      |                                 | Furnace(s)                    |      |    |
|                   |                                       |             | Combustion Products Vents  |      |                            | Ventilation<br><input type="checkbox"/> Supply <input type="checkbox"/> Exhst.  |      |                                 | FINAL APPROVAL                |      |    |
| <b>ELECTRICAL</b> | Conduits & or Cable                   |             | Conduits/ Cable  |      |                            | <input type="checkbox"/> Range<br><input type="checkbox"/> Dryer                |      |                                 | Temp Service<br>Temp Lighting |      |    |
|                   | Grounding & or Bonding                |             | Rough Wiring   |      |                            | <input type="checkbox"/> Generator(s)<br><input type="checkbox"/> Motors        |      |                                 | Fixtures<br>Lampholders       |      |    |
|                   | Floor Ducts Raceways                  |             | Service Panel Switchboard  |      |                            | <input type="checkbox"/> Water Htr<br><input type="checkbox"/> Welder           |      |                                 | Signs                         |      |    |
|                   | Service Conduit                       |             | Busways Ducts  |      |                            | <input type="checkbox"/> Heaters<br><input type="checkbox"/> Heat Cable         |      |                                 | Electric Mtr. Clearance       |      |    |
|                   | Temporary Power Pole                  |             | Subpanels  |      |                            | <input type="checkbox"/> Duct Htr(s)<br><input type="checkbox"/> Furnace(s)     |      |                                 | FINAL APPROVAL                |      |    |
| <b>BUILDING</b>   | Location, Set-backs, Esmt(s)          |             | Exterior Wall Construction   |      |                            | Roof Covering<br>Roof Drainage  |      |                                 | Smoke Detector                |      |    |
|                   | Excavation                            |             |  |      |                            | Exterior Lath   |      |                                 | Demolition (sewer cap)        |      |    |
|                   | Footings & Reinforcing                |             |  |      |                            | <input type="checkbox"/> Interior Lath<br><input type="checkbox"/> Wallboard    |      |                                 |                               |      |    |
|                   | Floor Slab                            |             | Interior Wall Construction   |      |                            | Fire Wall(s)  |      |                                 | Building or Structure         |      |    |
|                   | Foundation Walls                      |             | Columns & Supports   |      |                            | Fireplace<br>Chimney  |      |                                 |                               |      |    |
|                   | Sub-soil Drain                        |             | Crawl Space<br><input type="checkbox"/> Vent <input type="checkbox"/> Access |      |                            | Attic<br><input type="checkbox"/> Vent <input type="checkbox"/> Access          |      |                                 |                               |      |    |
|                   | Piles                                 |             | Floor System(s)  |      |                            |   |      |                                 | FINAL APPROVAL<br>BLDG. DEPT. |      |    |
|                   |                                       | Roof System |  |      | Special Insp Reports Rec'd |   |      | Certificate of Occupancy Issued |                               |      |    |
| <b>ADDITIONAL</b> | <b>INSPECTIONS, CORRECTIONS, ETC.</b> |             |  |      |                            | <b>INSPECTIONS, CORRECTIONS, ETC.</b>   |      |                                 |                               |      |    |
|                   |                                       |             |  |      |                            |   |      |                                 |                               |      |    |
|                   |                                       |             |  |      |                            |   |      |                                 |                               |      |    |
|                   |                                       |             |  |      |                            |   |      |                                 |                               |      |    |

  
**DEPARTMENT OF BUILDING INSPECTION AND CODE ENFORCEMENT**  
 1000 ...  
 ...

**PERMIT**

**CITY OF NAPOLEON - BUILDING DEPARTMENT**

01499 255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No.                      Issued 12-31-87  
date

Job Location 674 W RIVERVIEW  
address

Lot 10 HAGGARDY PARKS ADD  
sub-div or legal discript

Issued By E  
building official

Owner E. W. LAZAR  
name tel.

Address 674 W. RIVERVIEW

Agent BARTLEY ELECTRIC 599-2992  
builder-eng.-etc. tel.

Address 17-419 CORPS

Description of Use RESIDENCE

Residential 1  
no. dwelling units

Commercial                      Industrial                     

New                      Add'n.                      Alter                      Remodel X

Mixed Occupancy                     

Change of Occupancy                     

Estimated Cost \$ 400.00

**ZONING INFORMATION** PA

|                      |                |               |           |                          |           |
|----------------------|----------------|---------------|-----------|--------------------------|-----------|
| district<br><u>B</u> | lot dimensions | area          | front yd  | side yds                 | rear yd   |
| max hgt              | no pkg spaces  | no ldg spaces | max cover | petition or appeal req'd | date appr |

| FEE   | BASE                                    | PLUS | TOTAL |
|---|---|------|-------|
| BUILDING  |   |      |       |
| ELECTRICAL                                      | 10.00                                   | 1.00 | 10.00 |
| PLUMBING  |   |      |       |
| MECHANICAL                                      |   |      |       |
| DEMOLITION                                      |   |      |       |
| ZONING  |   |      |       |
| SIGN  |   |      |       |
| WATER TAP                                       |   |      |       |
| SEWER TAP                                       |   |      |       |
| TEMP. ELECT.                                    |   |      |       |
| ADDITIONAL PLAN REVIEW                          | Struct. <u>                    </u> hrs |      |       |
|   | Elect. <u>                    </u> hrs  |      |       |
| TOTAL FEES.....                                 |   |      | 10.00 |
| LESS MIN. FEES PAID <u>                    </u> |   |      |       |
| BALANCE DUE.....                                |   |      |       |

**WORK INFORMATION:** PA

Size: Length                      Width                      Stories                      Ground Floor Area                     

Height                      Building Volume (for demo. permit)                      cu. ft.

Electrical: REPLACE EXISTING WITH NEW 100 AMP OVERHEAD SERVICE  
brief description

Plumbing: NA  
brief description

Mechanical: NA  
brief description

Sign: NA Dimensions                      Sign Area                     

Additional Information:                     

**PAID**  
**DEC 31 1987**  
**CITY OF NAPOLEON**

Date                      Applicant Signature                       
owner-agent



CITY OF NAPOLEON  
ENGINEERING DEPARTMENT  
APPLICATION FOR ELECTRICAL PERMIT  
(PLEASE PRINT OR TYPE)

The undersigned hereby makes application for the installation, replacement, or alteration of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Code for 1, 2 and 3 Family Buildings.

Owner's Name E.W. LANZOR Address 674 RIVERVIEW DR NAPOLEON, MO

Contractor's Name BARTER ELECTRIC Address 13-414 WARD ST Tel. 599-2992

LOT INFORMATION:

Location of Project \_\_\_\_\_ Zoning District \_\_\_\_\_

BUILDING INFORMATION:

Single Family X Double Family \_\_\_\_\_ Multiple Family \_\_\_\_\_

New Construction \_\_\_\_\_ Existing \_\_\_\_\_ Addition \_\_\_\_\_

Replacement \_\_\_\_\_ Remodel \_\_\_\_\_ Service Change X

Size: Total Square Foot Per Floor \_\_\_\_\_ No. of Stories \_\_\_\_\_

DESCRIPTION OF WORK

Size of Service 100 AMP. Service Change Only YES (Yes or No)

Total Number of New Circuits \_\_\_\_\_ Total Number of New Circuits Excluding Appliance Circuits \_\_\_\_\_

APPLIANCE CIRCUITS: (indicate quantity)

Electric Range \_\_\_\_\_ Range Hood \_\_\_\_\_ Clothes Dryer \_\_\_\_\_ Dishwasher \_\_\_\_\_

Air Conditioner \_\_\_\_\_ Attic Fan Blower \_\_\_\_\_ Room Exhaust Fan \_\_\_\_\_

Disposal \_\_\_\_\_ Hot Water Heater \_\_\_\_\_ Electric Oven \_\_\_\_\_

Require Temporary Electric NO (Yes or No)

Note: G.F.I.C. required for all temporary electric with approved ground rod at service.

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELECTRICAL LAY-OUT AND RISER DIAGRAM.

ESTIMATED COST OF COMPLETED PROJECT: 300-490

DATE 12-31-87 APPLICANT'S SIGNATURE [Signature]  
OWNER-CONTRACTOR-AGENT

