

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

Permit No. 2611 Issued 4-21-92  
 Location 680 W. Riverview Ave.  
 Lot \_\_\_\_\_  
 Issued by Brent N. Damman  
 Owner Ronald Sands 599-8653  
 Address 680 W. Riverview Ave.,  
Napoleon, Ohio  
 Agent Jim Speiser & Sons 599-1846  
 Address P.O. Box 545, Napoleon, Ohio  
 Use Type - Residential xx  
 Other - Describe \_\_\_\_\_  
 No. Dwelling Units 1  
 New \_\_\_\_\_ Replacement \_\_\_\_\_  
 Add'n. \_\_\_\_\_ Alter xx Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ 500.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Electrical	\$ <u>15.00</u>	\$ _____	\$ <u>15.00</u>
<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	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sew. Insp.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp. Water	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp. Elec.	\$ _____	\$ _____	\$ _____
TOTAL FEES.....			\$ <u>15.00</u>
LESS FEES PAID.....			\$ _____
BALANCE DUE.....			\$ <u>15.00</u>

ZONING INFORMATION

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

WORK INFORMATION

Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_  
 Height \_\_\_\_\_ Building Volume (for Demo. Permit) \_\_\_\_\_  
 Electrical: Service change  
 Plumbing: \_\_\_\_\_  
 Mechanical: \_\_\_\_\_

Additional Information: \_\_\_\_\_ **PAID**  
 \_\_\_\_\_ **APR 29 1992**  
 \_\_\_\_\_ **CITY OF NAPOLEON**  
 '91-92 Applicant Signature Jim Speiser

# INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						Ty.	
	Type	Date	By	Type	Date	By	Type	Date	By		
<b>PLUMBING</b>	Building Drains			Drainage, Waste & Vent Piping			Indirect Waste			Drainage, v. & 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) <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
<b>ELECTRICAL</b>	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	
<b>BUILDING</b>	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		
<b>ADDITIONAL</b>	<b>INSPECTIONS, CORRECTIONS, ETC.</b>			<b>INSPECTIONS, CORRECTIONS, ETC.</b>							

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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. \_\_\_\_\_

Permit No. 2611 Issued \_\_\_\_\_

Job Location 680 W. RIVERVIEW AV

Lot \_\_\_\_\_  
sub-div. or legal disc. \_\_\_\_\_

Issued By \_\_\_\_\_  
building official \_\_\_\_\_

Owner RONALD SANDS Pn 599-8653

Address SAME

Agent JIM SPREIER & SONS Pn 599-1846

Address PO Box 545 WPAO

Description of Use \_\_\_\_\_

Ck. Permits Req.	Base	Fees Plus	Total
Building	_____	_____	_____
<input checked="" type="checkbox"/> Electrical	<u>15.00</u>	_____	<u>15.00</u>
Plumbing	_____	_____	_____
Mechanical	_____	_____	_____
Demolition	_____	_____	_____
Zoning	_____	_____	_____
Sign	_____	_____	_____
Water tap	_____	_____	_____
Sewer Tap	_____	_____	_____
Temp. Water	_____	_____	_____
Temp. Elsc.	_____	_____	_____

Residential 1  
no. dwelling units \_\_\_\_\_

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

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

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

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

Estimated Cost \$ 500.00

Additional struc.	_____ hrs
plan review	_____ hrs
Elect.	_____ hrs
Total Fees.....	<u>15.00</u>
Less Min. Fees Pd.	_____
date	_____
Balance Due.....	<u>15.00</u>

**ZONING INFORMATION**

district	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
_____	_____	_____	_____	_____	_____

**WORK INFORMATION:**

**BUILDING:** Garage Fl. Area \_\_\_\_\_ Basement Fl. Area \_\_\_\_\_ Second Floor Area \_\_\_\_\_  
Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_

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

Description of Work: Electrical Service Change

ELECTRICAL: Electrical Contractor Jim Spriser & Son's Pn. 899-1846

Address \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_

Type of work: New \_\_\_\_\_ Service change  Rewiring  Additional Wiring \_\_\_\_\_ Temp. Elec. Req. \_\_\_\_\_

Size of service 200 A Underground \_\_\_\_\_ Overhead  No. of new circuits 2 yes no

Description of work: NEW 200 A SERVICE & REWIRE 2nd FLOOR

PLUMBING: Plumbing Contractor \_\_\_\_\_ Pn. \_\_\_\_\_

Address \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_

Water Tap Req. \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_  
yes no

San. Sewer Tap Req. \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_  
yes no type

St. Sewer Tap Req. \_\_\_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Street to be Opened \_\_\_\_\_  
yes no 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 \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

Application not valid without signature