

PERMIT

CITY OF NAPOLEON, OHIO - BUILDING DEPARTMENT

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

Permit No. <u>3868</u>	Issued <u>04/24/96</u>	FEEES	BASE	PLUS	TOTAL
Job Location <u>1056 N. Scott</u>		<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>18.00</u>	\$ <u>27.00</u>
Lot _____		<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
Issued by <u>Brent N. Damman</u>		<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
Owner <u>Ronald Ferner 592-8210</u>		<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
Address <u>1058 N. Scott</u>		<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
Agent <u>Mock</u> Mock <u>Buehrer 592-3626</u>		<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
Address <u>145 Capri</u>		<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
Use Type - Residential <u>X</u>		<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
Other - Describe _____		<input type="checkbox"/> Sew. Insp.	\$ _____	\$ _____	\$ _____
No. Dwelling Units _____		<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
New _____ Replacement _____		<input type="checkbox"/> Temp. Water	\$ _____	\$ _____	\$ _____
Add'n. <u>X</u> Alter _____ Remodel _____		<input type="checkbox"/> Temp. Elec.	\$ _____	\$ _____	\$ _____
_____ Occupancy _____		TOTAL FEES.....\$ <u>27.00</u>			
Change of Occupancy _____		LESS FEES PAID.....\$ <u>27.00</u>			
Estimated Cost \$ <u>2000.00</u>		BALANCE DUE.....\$ _____			

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

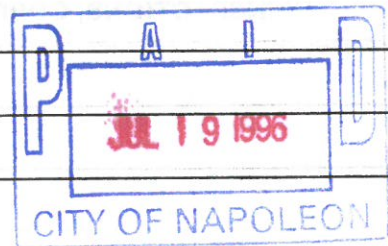
Size: Length _____ Width _____ Stories _____ Ground Floor Area _____
 Height _____ Building Volume (for Demo. Permit) _____

Electrical: _____

Plumbing: _____

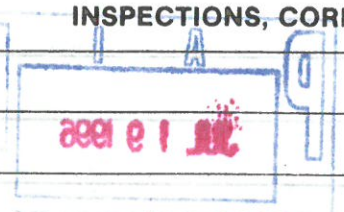
Mechanical: _____

Additional Information: 16' x 14' Wood Deck



Date 4-24-96 Applicant Signature Ronald Ferner

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		
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.		9/11 BD
					Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.						
													

APPLICATION FOR

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit

FROM - The City of Napoleon, Ohio, Building Department

255 West Riverview Avenue; P.O. Box 151; Napoleon, Ohio 43545 - Telephone (419) 592-4010

ENTRY NO. _____		<u>Base</u>	<u>Plus</u>	<u>Total</u>
PERMIT NO. <u>3868</u> ISSUED <u>4-24-96</u>	<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>18.00</u>	\$ <u>27.00</u>
JOB LOCATION <u>1056 N. Scott</u>	<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
LOT _____ (Subdivision or Legal Description)	<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
ISSUED BY <u>BND</u> (Building Official)	<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
OWNER <u>Ronald Ferrer</u> PHONE <u>592-8210</u>	<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
ADDRESS <u>1058 N. Scott</u>	<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
AGENT <u>Mock/Bachner</u> PHONE <u>592-3626</u>	<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
ADDRESS <u>145 Copr Nap.</u>	<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
USE: <input checked="" type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial	<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Temp Water	\$ _____	\$ _____	\$ _____
WORK: <input type="checkbox"/> New <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Remodel	<input type="checkbox"/> Temp Elec.	\$ _____	\$ _____	\$ _____
ESTIMATED COST = \$ <u>2000.00</u>	Additional Structure _____ Hours _____			
	Plan Review: Electric _____ Hours _____			

TOTAL FEES	\$ <u>27.00</u>
Less Fees Paid	\$ _____
BALANCE DUE	\$ <u>27.00</u>

ZONING INFORMATION

District	Lot Dimensions	Area	Front Yard	Side Yard	Rear Yard

Max Height	No. Pkg. Spaces	No. Ldg. Spaces	Max Cover	Petition or Appeal Required-Date

WORK INFORMATION

Building: Ground Floor Area _____ sq. ft. Basement Floor Area _____ sq. ft.

Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.

Size: Length _____ Width _____ Stories _____ Height _____

Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: 16' x 14' wood Deck

ELECTRICAL: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: () New () Service Change () Rewiring () Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes () No
Size of Service _____ Underground _____ Overhead _____ Number of New Circuits _____

Description of Work: _____

PLUMBING: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

WATER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Water Dist. Pipe _____
SANITARY SEWER TAP REQUIRED - () Yes () No Size _____ Type of Pipe _____ Dr. Waste Vt. Pipe _____
STREET SEWER TAP REQUIRED - () Yes () No 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 = _____
Clothes Washer = _____ Floor Drains = _____ Dishwasher = _____ Other _____ Total = _____

Description of Work: _____

MECHANICAL: Contractor _____ Phone _____
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 _____
NUMBER OF HEAT ZONES = _____ HOT WATER - () One (1) Pipe () Two (2) Pipes () Series Loop
ELECTRIC HEAT - Number of Circuits _____ Number of Furnaces _____ Number of Hot Air Runs _____
Number of Hot Water Radiators _____ Total Heat Loss _____ Rated Capacity of Furnace/Boiler _____
LOCATION OF HEATING UNITS - () Crawl Space () Floor Level () Attic () Suspended () Roof () Outside

Description of Work: _____

DRAWINGS REQUIRED: All applications must be accompanied by two (2) complete sets of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall be drawn to scale, show all existing structure on the Site Plans, and 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 Department Rules and Regulations, Standard Specifications and other pertinent sections of the Napoleon Code of Ordinances.

Signature of Applicant _____ Date _____