

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: 668                      DATE ISSUED: 07-02-01                      ISSUED BY: BND

JOB LOCATION: 1414 SCOTT ST STE 630                      EST. COST:

LOT #:                                      SUBDIVISION NAME:

OWNER: WOODS, KEN  
ADDRESS: 194 OLD CREEK DR  
CSZ: NAPOLEON, OH 43545  
PHONE:

AGENT: ELLING PLBG & HTG  
ADDRESS: T-487 ST HWY 108  
CSZ: NAPOLEON, OH 43545  
PHONE: 419-598-8991

USE TYPE - RESIDENTIAL:                      OTHER:

ZONING INFORMATION

DIST:                      LOT DIM:                      AREA:                      FYRD:                      SYRD:                      RYRD:  
MAX HT:                      # PKG SPACES:                      # LOADING SP:                      MAX LOT COV:

BOARD OF ZONING APPEALS:

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

WORK INFORMATION

SIZE - LGTH:                      WIDTH:                      STORIES:                      LIVING AREA SF:  
GARAGE AREA SF:                      HEIGHT:                      BLDG VOL DEMO PERMIT:

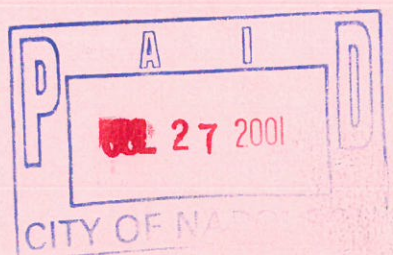
WORK-DESCRIPTION  
WATER METER INSTALL

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
PLUMBING PERMIT		9.00

TOTAL FEES DUE                      9.00

*July 27-01*  
-----  
DATE

*Earl H. Elling*  
-----  
APPLICANT SIGNATURE



CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 668

DATE ISSUED: 07-02-2001

JOB LOCATION: 1414 SCOTT ST STE 630

OWNER: WOODS, KEN

OWNER PHONE:

CONTRACTOR: ELLING PLBG & HTG

CONTRACTOR PHONE: 419-598-8991

WORK DESCRIPTION: WATER METER INSTALL

PLUMBING: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL 7-20-01

SEWER INSP \_\_\_\_\_

MECHANICAL: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

FURNACE REPLC \_\_\_\_\_ AIR COND \_\_\_\_\_

ELECTRICAL: UNDGR \_\_\_\_\_ RGHIN \_\_\_\_\_ FINAL \_\_\_\_\_

SERV UPGR \_\_\_\_\_

BUILDING: SITE \_\_\_\_\_ FTG \_\_\_\_\_ FNDDT \_\_\_\_\_

STRUC \_\_\_\_\_ ROOF \_\_\_\_\_ EXT \_\_\_\_\_

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: BNJ

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 #: 668

ISSUED: 07-02-2001

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OWNER: WOODS, KEN

PHONE:

ADDRESS: 194 OLD CREEK DR NAPOLEON, OH 43545

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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 Double check valve

assembly.

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