

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

Permit No. 2528 Issued 12-26-91  
 Job Location 1485 N. Scott Street  
 Lot 1 Dunn & Lytle  
 Issued by Brent N. Damman  
 Owner Lange, Lytle 592-7796  
 Address 1465 North Scott - Napoleon, OH  
 Agent Brandt Bros. Elec. 267-3640  
 Address Ridgeville Corners, Ohio  
 Use Type - Residential \_\_\_\_\_  
 Other - Describe Commercial  
 No. Dwelling Units \_\_\_\_\_  
 New X Replacement \_\_\_\_\_  
 Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel \_\_\_\_\_  
 Mixed Occupancy \_\_\_\_\_  
 Change of Occupancy \_\_\_\_\_  
 Estimated Cost \$ \_\_\_\_\_

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
<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 checked="" type="checkbox"/> Temp. Water	\$ <u>10.00</u>	\$ _____	\$ <u>10.00</u>
<input checked="" type="checkbox"/> Temp. Elec.	\$ _____	\$ _____	\$ _____
TOTAL FEES.....			\$ <u>10.00</u>
LESS FEES PAID.....			\$ _____
BALANCE DUE.....			\$ <u>10.00</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: \_\_\_\_\_  
 Plumbing: \_\_\_\_\_  
 Mechanical: \_\_\_\_\_

Additional Information: New Office Building  
 Date 12-27-91 Applicant Signature [Signature]  
 PAID  
 DEC 27 1991  
 CITY OF NAPOLEON

# INSPECTION RECORD

CITY OF NAPOLÉON, OHIO - BUILDING DEPARTMENT

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) <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>	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					
	PAID											
	DEC 27 1991											
	CITY OF NAPOLÉON											

**APPLICATION FOR  
Residential Building, Electrical, Plumbing, Mechanical & Demolition Permits  
from the  
CITY OF NAPOLEON - BUILDING DEPARTMENT  
255 West Riverview Ave., Napoleon, Ohio 43545 (419) 592-4010**

PERMIT NO. 2528 ISSUED 12-26-91  
 JOB LOCATION 1485 N. Scott  
 LOT 1 SUB-DIV Danna Lytle  
 ISSUED BY BDD  
 OWNER Lange, Lytle PN 592-778  
 ADDRESS 1465 N. Scott P.O. Box 109 Napoleon  
 AGENT Brandt Bros Elec. PN 267-3140  
 ADDRESS Ridgeway Parkers, Ohio  
 DESCRIPTION OF USE:  
 \_\_\_\_\_ RESIDENTIAL  COMMERCIAL \_\_\_\_\_ INDUSTRIAL  
 NEW \_\_\_\_\_ ADDITION \_\_\_\_\_ ALTER \_\_\_\_\_ REMODEL  
 MIXED OCCUPANCY \_\_\_\_\_  
 CHANGE OF OCCUPANCY \_\_\_\_\_  
 ESTIMATED COST \$ \_\_\_\_\_  
 ZONING INFORMATION:

	Base	Plus	Total
[ ] Building	\$ _____	\$ _____	\$ _____
[ ] Electrical	\$ _____	\$ _____	\$ _____
[ ] Plumbing	\$ _____	\$ _____	\$ _____
[ ] Mechanical	\$ _____	\$ _____	\$ _____
[ ] Demolition	\$ _____	\$ _____	\$ _____
[ ] Zoning	\$ _____	\$ _____	\$ _____
[ ] Sign	\$ _____	\$ _____	\$ _____
[ ] Water Tap	\$ _____	\$ _____	\$ _____
[ ] Sewer Tap	\$ _____	\$ _____	\$ _____
[ ] Temp Water	\$ _____	\$ _____	\$ _____
<input checked="" type="checkbox"/> Temp Elec	\$ <u>10.00</u>	\$ _____	\$ <u>10.00</u>
Total Fees	.....		\$ <u>10.00</u>
Less Fees Paid	.....		\$ _____
BALANCE DUE	.....		\$ <u>10.00</u>

District	Lot Dimensions		Area	Front Yard	Side Yard	Rear Yard
Max Hgt	No. Pkg Spaces	No. Ldg Spaces	Max Cover	Petition or Appeal Required and Date		

**WORK INFORMATION:**  
 Building: Garage Floor Area \_\_\_\_\_ Basement Floor Area \_\_\_\_\_ Second Floor Area \_\_\_\_\_  
 Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_ Height \_\_\_\_\_  
 Building Volume (for Demolition Permit) \_\_\_\_\_ cu. ft.

DESCRIPTION OF WORK: New Office Building

**PAID**

DEC 27 1991

**ELECTRICAL:** Electrical Contractor \_\_\_\_\_ Phone \_\_\_\_\_

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

Type of Work: New \_\_\_ Service Change \_\_\_ Rewiring \_\_\_ Add'l Wiring \_\_\_ Temp Elec Req.: Yes \_\_\_ No \_\_\_

Size of Service \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_ No. of New Circuits \_\_\_\_\_

Description of Work: \_\_\_\_\_

**PLUMBING:** Plumbing Contractor \_\_\_\_\_ Phone \_\_\_\_\_

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

Water Tap Req.: Yes \_\_\_ No \_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_

San. Sewer Tap Req.: Yes \_\_\_ No \_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_

St. Sewer Tap Req.: Yes \_\_\_ No \_\_\_ 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) \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL:** 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 \_\_\_

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 \_\_\_\_\_

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 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 Department Rules and Regulations, Standard Specifications and other Pertinent Sections of the Napoleon Code of Ordinances.

Dated \_\_\_\_\_ Signature of Applicant \_\_\_\_\_