

PERMIT

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

Permit No. 02401 Issued 8-5-91
date

Job Location 831 North Scott Street
address

Lot 1 Park Addition
sub-div or legal discript

Issued By Brent N. Damman
building official

Owner Larry Hilvers 592-5898
name tel.

Address 831 North Scott St., Napoleon

Agent BoWellco Buildings 592-0966
builder-eng.-etc. tel.

Address P.O. Box 62, 424 East, Napoleon

Description of Use _____

Residential _____
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ _____

| FEES | BASE | PLUS | TO |
|---|---|---------|---------|
| <input checked="" type="checkbox"/> BUILDING | \$9.00 | \$44.00 | \$53. |
| <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 type="checkbox"/> TEMP. WATER | | | |
| <input type="checkbox"/> TEMP. ELECT. | | | |
| ADDITIONAL PLAN REVIEW | Struct. _____ hrs _____ Elect. _____ hrs _____ | | |
| TOTAL FEES..... | | | \$53.00 |
| LESS MIN. FEES PAID <u>7-30-91</u> <small>date</small> | | | 53.00 |
| BALANCE DUE..... | | | \$ 0.00 |

ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds | rear yd |
|----------|----------------|---------------|-----------|--------------------------|-----------|
| | irregular | | | | |
| 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) _____ cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: 24' x 24' Post Frame Building (Garage) **PAID**

Date 7-30-91 Applicant Signature *Douglas Stubb* JUL 30 1991
owner-agent CITY OF NAPOLEON

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 | 8/22 | BD | Smoke Detector | | | |
| | Excavation | | | | | Exterior Lath | | | Demolition (sewer cap) | | | |
| | Footings & Reinforcing | 8/7 | BD | | | <input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard | | | | | | |
| | Floor Slab | | | Interior Wall Construction | | Fire Wall(s) | | | Building or Structure | | | |
| | Foundation Walls | 8/7 | BD | 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. | 8/20 | 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, PERMITS and DEMOLITION PERMIT
from the
CITY OF NAPOLEON - BUILDING DEPARTMENT

Entry No. _____ 255 West Riverview Ave. Napoleon, Ohio 43545 Pn. 419-592-4010

Permit No. 2401 Issued 8-5-91

Job Location 831 N. Scott St.

Lot 1 Park Addition
sub-div. or legal disc.

Issued By _____ building official

Owner Larry Hillers Pn 592-5898

Address 831 N. Scott

Agent BowWelle Buildings Pn 592-0966

Address P.O. Box 62 - 424 East

Description of Use _____

Residential _____ no. dwelling units _____

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ \$5,400.00

| Ch. Permits Reg. | Base | Fees Plus | Total |
|--|------------------------|-------------------------|-------------------------|
| <input checked="" type="checkbox"/> Building | <u>9.⁰⁰</u> | <u>44.⁰⁰</u> | <u>53.⁰⁰</u> |
| <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"/> Sewer Tap | | | |
| <input type="checkbox"/> Temp. Water | | | |
| <input type="checkbox"/> Temp. Elec. | | | |
| Additional plan review | struc. _____ hrs | Elect. _____ hrs | |
| Total Fees..... | | | <u>53.⁰⁰</u> |
| Less Min. Fees Pd. <u>7-30-91</u> date | | | <u>53.⁰⁰</u> |
| Balance Due..... | | | <u>- 0 -</u> |

ZONING INFORMATION

| district | lot dimensions | area | front yd | side yds. | rear yd |
|----------|------------------|---------------|-----------|---------------------------|-----------|
| | <u>Irregular</u> | | | | |
| 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 24' Width 24' Stories 1 Ground Floor Area 24x24
 Height 9' Inside Building Value (for deas. permit) _____ cu. ft.

Description of Work: 24'x24' Post Frame Building (Garage)

Bowellco Buildings

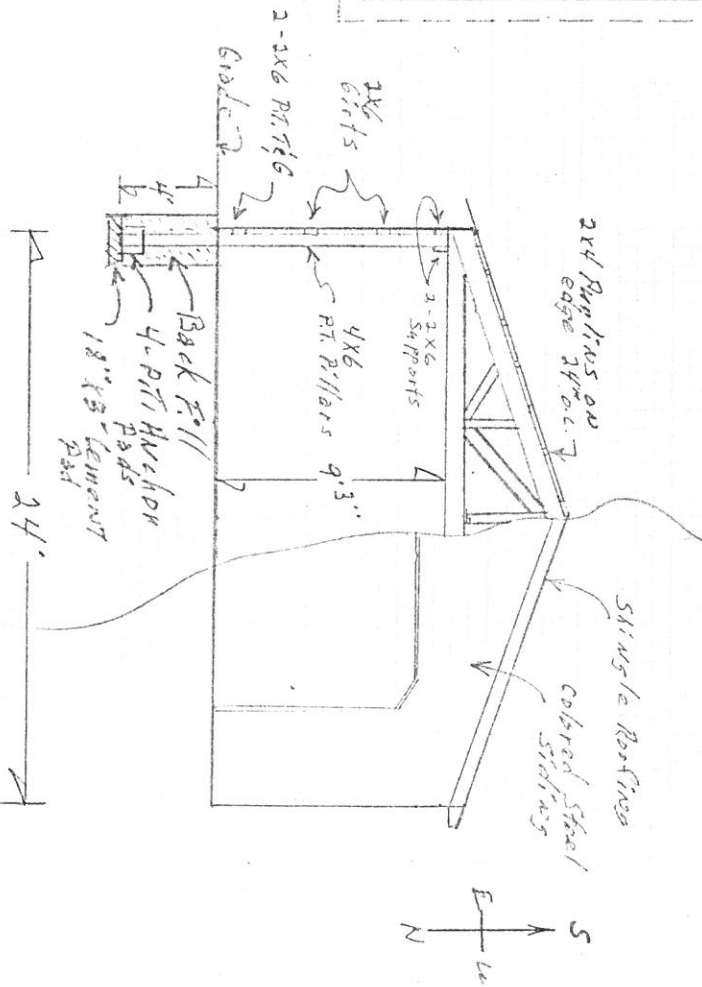
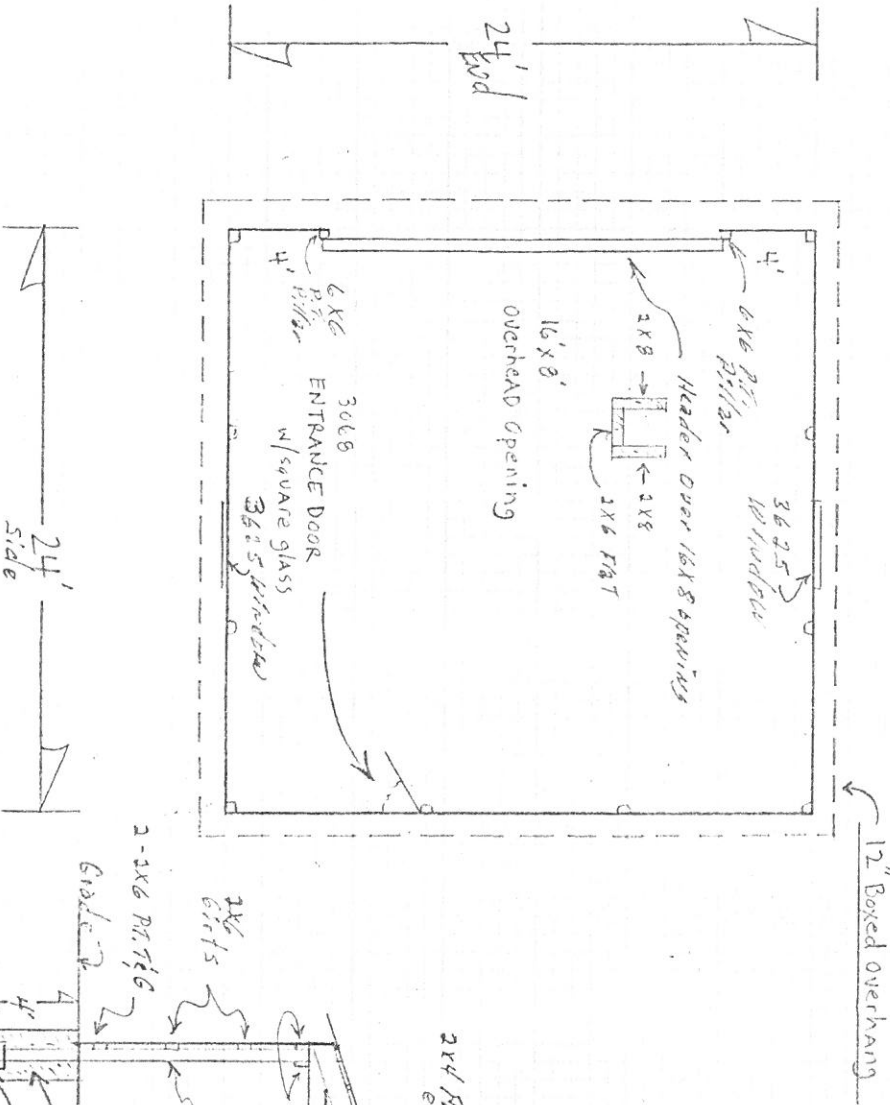
Building Layout

Size 24 x 24 x 9'3"

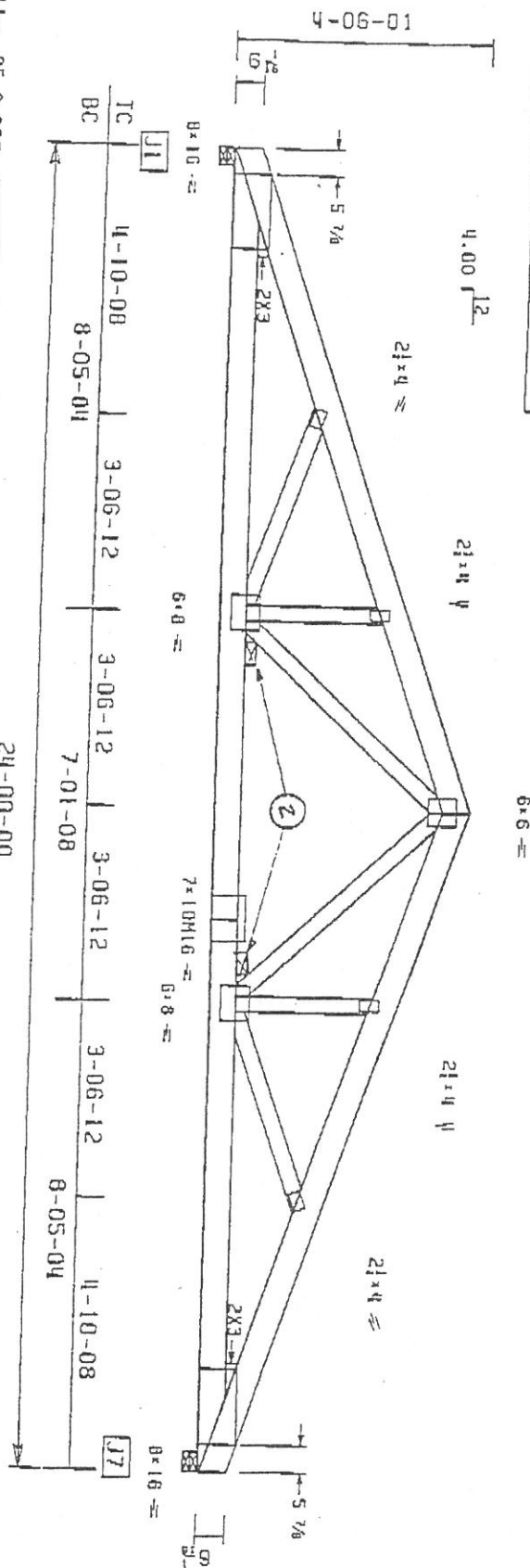
Roof Loading: TOTAL = _____ psf

Date 7/8/91
 Customer Larry Hilvers
 Use GARAGE

FEET



JOB 912308
 TYPE 900 7/9/91
 2 OF 2



TC11 = 25.0 PSF SPACING = 8-00-00 REACTIONS MIN L/DEF = 24'/0.47" = 608, CAMB = 0 1/4"
 TCOL = 10.0 PSF INCR: P=0.98 L=1.15 (LBS) BRG(IN) 20 GA. M20 PLATES 258 PSI GNS (MAX)
 BC11 = 0.0 PSF BUTT CUT = 0 1/4" J 1 = -3456 4.1 16 GA. M16 PLATES 218 PSI GNS (MAX)
 BC01 = 1.0 PSF J 7 = -3456 4.1 ** SEE NOTE ON PURLINS **
 PANEL CLIP COMPANY ZARTMAN

TOP CHORD - CSR = 0.981----- BOTTOM CHORD - CSR = 0.875----- HEBS - CSR = 0.429-----
 2X 6 NO 1 KD-15 SYP 2X 6 NO 1 KD-15 SYP 2X 4 NO 2 KD-15 SYP
 C 1 = -8663 C 3 = -7086 C 5 = -7086 C 7 = 8219 C 8 = 5171 C 9 = 8219 W 1 = -1644 W 3 = 2333 W 5 = -997
 C 2 = -7086 C 4 = -7086 C 6 = -8663 W 2 = -997 W 4 = 2333 W 6 = -1644

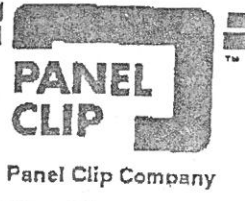
1. * TOP CHD PURLIN SPG = 24.0 IN. PURLINS TO BE DESIGNED BY OTHERS.
2. * THERE ARE 2 ROWS OF LATERAL BRACING AT MAX SPACING OF 10FT O.C. REQD ON BOT CHD.
3. * NOTE THE WEDGE DETAIL AT THE HEEL(S).
4. THE BOT CHD DEAD LOAD SHOWN IS SUFFICIENT ONLY TO COVER THE TRUSS WEIGHT ITSELF AND DOES NOT ALLOW FOR ANY ADDL LOAD TO BE ADDED TO THE BOT CHD.
5. ALL PLATES ARE M20 PLATES UNLESS OTHERWISE INDICATED.

CONFORMS TO TPI NO REPETITIVE INCR



JUL 11 1991

PTAH
 VOB.81



WARNING - Verify design parameters and READ NOTES ON THIS AND REVERSE SIDE BEFORE USE.
 Design valid for use only with Mitek connectors. This design is based only upon parameters shown, and is for an individual building component to be installed and loaded vertically. Applicability of design parameters and proper incorporation of component is responsibility of building designer - not trust designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult GSI-88 Quality Standard, DSB-89 Bracing Specification, and HIS-90 Handling, Installing and Bracing Recommendation available from Truss Plate Institute, 583 D'Onofrio Drive, Madison, WI 53719.

