

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

Permit No. <u>3763</u> Issued <u>01/08/96</u> Job Location <u>840 N. Scott St.</u> Lot _____ Issued by <u>Brent N., Damman</u> Owner <u>Snyder & Wesche Funeral Home, Inc.</u> Address <u>830 Napoleon, Ohio</u> <u>N. Scott St.</u> Agent <u>L. J. Irving, Jr. & Sons 592-8456</u> Address <u>13-899 N Rt #6 Napoleon, OH</u> Use Type - Residential _____ Other - Describe <u>Demolition</u> No. Dwelling Units _____ New _____ Replacement _____ Add'n. _____ Alter _____ Remodel _____ Fixed Occupancy _____ Change of Occupancy _____ Estimated Cost \$ <u>6500.00</u>	<table border="0" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">FEES</th> <th style="text-align: right;">BASE</th> <th style="text-align: right;">PLUS</th> <th style="text-align: right;">TOTAL</th> </tr> <tr> <td><input type="checkbox"/> Building</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Electrical</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Plumbing</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Mechanical</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input checked="" type="checkbox"/> Demolition</td> <td style="text-align: right;">\$ 10.00</td> <td style="text-align: right;">\$ 5.00</td> <td style="text-align: right;">\$ 15.00</td> </tr> <tr> <td><input type="checkbox"/> Zoning</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Sign</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Water Tap</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Sew. Insp.</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Sewer Tap</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Temp. Water</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Temp. Elec.</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="3" style="text-align: right;">TOTAL FEES.....</td> <td style="text-align: right;">\$ 15.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">LESS FEES PAID.....</td> <td style="text-align: right;">\$ 15.00</td> </tr> <tr> <td colspan="3" style="text-align: right;">BALANCE DUE.....</td> <td style="text-align: right;">\$ -0-</td> </tr> </table>	FEES	BASE	PLUS	TOTAL	<input type="checkbox"/> Building	\$ _____	\$ _____	\$ _____	<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____	<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____	<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____	<input checked="" type="checkbox"/> Demolition	\$ 10.00	\$ 5.00	\$ 15.00	<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.....			\$ 15.00	LESS FEES PAID.....			\$ 15.00	BALANCE DUE.....			\$ -0-
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ZONING INFORMATION

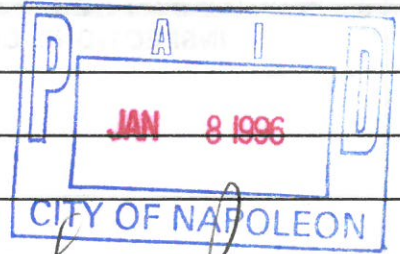
district	lot dimensions	area	front yd	side yd	rear yd
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

WORK INFORMATION

Size: Length 36' Width 22' Stories 2 Ground Floor Area 960
 Height 15' Building Volume (for Demo. Permit) _____

Electrical: _____
 Plumbing: _____
 Mechanical: _____

Additional Information: Demolition



Date 1-8-96 Applicant Signature L. J. Irving, Jr. Inc. Inc.

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)	1/2	00
	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			
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.					INSPECTIONS, CORRECTIONS, ETC.					
	<div style="border: 1px solid blue; padding: 5px; display: inline-block;"> 3001 8 WAL CITY OF NAPOLEON </div>										

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. _____

PERMIT NO. 3763 ISSUED 1-8-96 () Building \$ _____ \$ _____ \$ _____

JOB LOCATION 840 N SCOTT () Electrical \$ _____ \$ _____ \$ _____

LOT _____ (Subdivision or Legal Description) () Plumbing \$ _____ \$ _____ \$ _____

ISSUED BY BND (Building Official) () Mechanical \$ _____ \$ _____ \$ _____

OWNER Snyder & Wesche Funeral Home Inc PHONE 592-3010 (X) Demolition \$ 10.00 \$ 5.00 \$ 15.00
6,500

ADDRESS 830 Napoleon, OH 43545 () Zoning \$ _____ \$ _____ \$ _____

AGENT L.J. IRVING JR SONS INC PHONE 592-8456 () Sign \$ _____ \$ _____ \$ _____

ADDRESS 17-899-12 R#6 Napoleon, OH 43545 () Water Tap \$ _____ \$ _____ \$ _____

USE: () Residential () Commercial () Industrial () Sewer Tap \$ _____ \$ _____ \$ _____
 () Other _____ () Temp Water \$ _____ \$ _____ \$ _____

WORK: () New () Addition () Replacement () Remodel () Temp Elec. \$ _____ \$ _____ \$ _____

ESTIMATED COST = \$ 6,500.00

Additional Structure _____ Hours _____
 Plan Review: Electric _____ Hours _____

TOTAL FEES	\$	<u>15.00</u>
Less Fees Paid	\$	<u>15.00</u>
BALANCE DUE	\$	<u>0</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

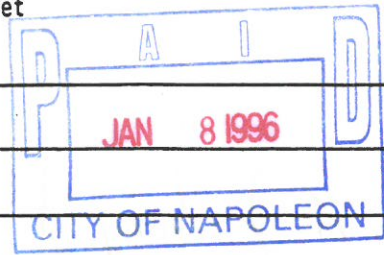
Building: Ground Floor Area ⁷⁶⁸⁰ 960 sq. ft. Basement Floor Area ⁷⁶⁸⁰ 960 sq. ft.

Garage Floor Area ^{792 6376} 22 sq. ft. 2nd Floor Area 960 sq. ft. Other NONE sq. ft.

Size: Width 22' Length 36' Stories 2 Height 15' GARAGE SIZE 30' x 30'

Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: DEMOLITION



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 R. J. Irving Jr. Inc. Sons Date 1/8/96