THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT 255 W. RIVERVIEW

(419)592-4010

Building Permit

Page 1 of 1

Permit Number: BP2005-180

Printed: 10/24/2005

Property Address:

909 Scott St.

Applicant

Address:

Tommy J Ashbaugh

909 Scott St.

Approval Date: 10/24/2005

Napoleon, OH 43545

Phone: 419-599-0173

Owners

Name: Mr. Tommy J Ashbaugh

Phone:

419-599-0173

Address: 909 Scott St.

Fees and Receipts:

FEE2005-805

Number

Contractors

Description

Building Permit Fee (Auto)

Amount

\$29.00

Total Fees:

\$29.00

Description

Structure Use:

Construction Value: \$15,000.00

Start Date: End Date:

Floor Areas

Living Space:

Living Opace.

Basement/Storage:

Garage:

Other:

Total Area:

Description of work to be done:

Garage addition 24' x 40'

Date: 10-24-05

Applicant signature:

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

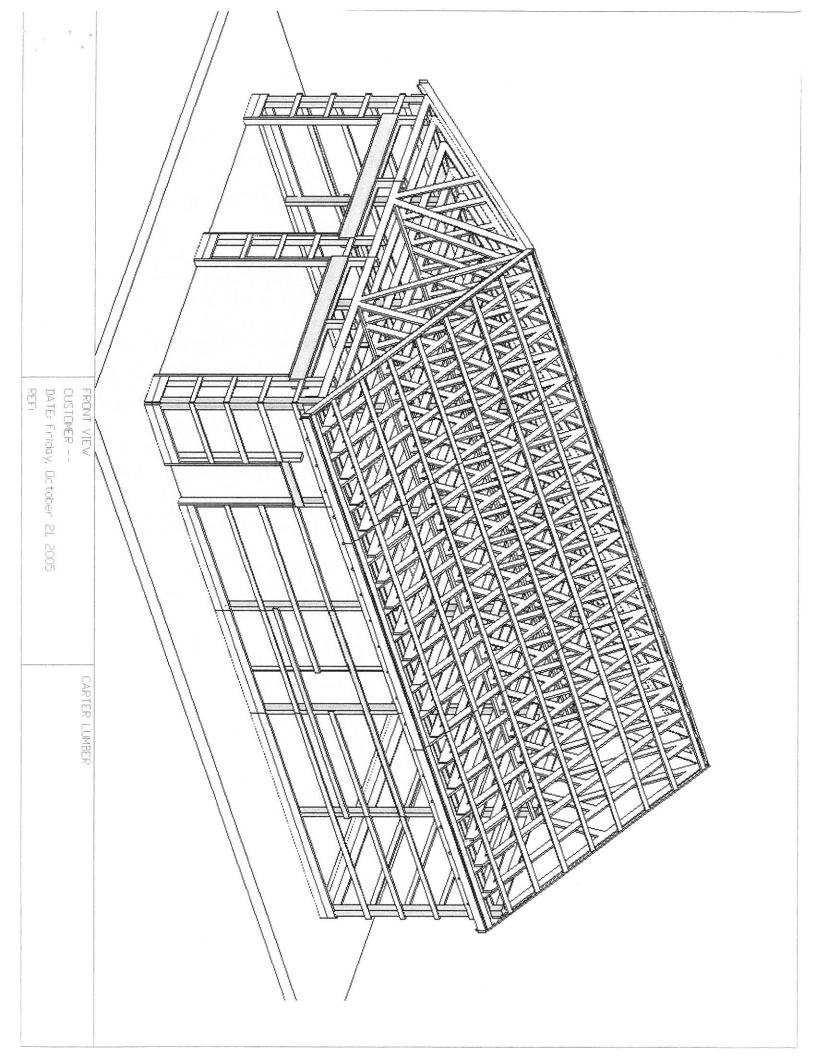
THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITIONS, REMODELING.

| DATE: 10-24-05 JOB LOCATION: 909 Scott St. | | | |
|--|--------------------------------------|--|--|
| | | | |
| OWNER: TOMMY J. AShbaugh PHONE: 41 | 9-599-0173 | | |
| OWNER ADDRESS: 909 Scott St. | CITY: NAPOLRON ZIP: 43545 | | |
| CONTRACTOR | PHONE: SKILL | | |
| T AZYLYY | :X | | |
| If yes to whom: | | | |
| DESCRIPTION OF WORK TO BE PERFORMED: 24 × 40' Buil | dins | | |
| | 3 | | |
| PLEASE MARK THE TYPE OF WORK YOU W | ILL BE PERFORMING | | |
| _A/C ADD ON | REMODELING | | |
| BOILER REPLACEMENT | ROOFING | | |
| CURBING | _SEWER REPAIRS** | | |
| DECKS * | _SIDEWALK* | | |
| DRIVEWAY* | SIDING | | |
| ELECTRICAL SERVICE UPGRADE | _STORAGE SHED* | | |
| ELECTRICAL SERVICE NEW | | | |
| FENCE* | _SWIMMING POOL* | | |
| _ADDITIONS* | FURNACE REPLACEMENT TEMP ELECTRIC | | |
| FURNACE NEW | WATER TAP (size") | | |
| _LAWN METER | WINDOWS | | |
| PLUMBING | ZONING | | |

*PLEASE INCLUDE A PICTURE SHOWING MEASURMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.

** IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE.



Top chord 2x8 SP 2400f-2.0E :82 2x6 SP 2400f-2.0E:801 chord 2x8 SP 2400f-2.0E :82 2x6 SP 2400f-2.0E:

Caloulated horizontal deflection is 0.15" due to live load and 0.15" due to load.

BC attic room floor loading: LL = 40.00 psf: DL = 10.00 psf: from 6-0-0 t 18-0-0.

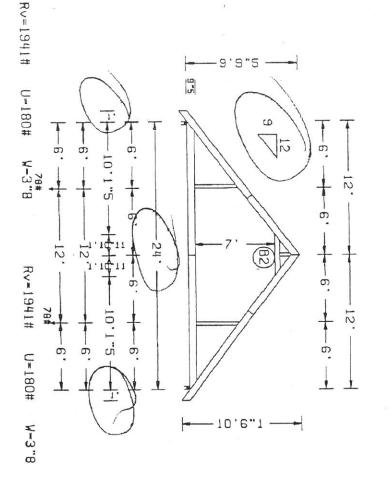
90 mph wind, 15.00 ft mean hgt, ASCE 7-98, CLOSED bidg, Located anywhere in roof, CAT II, EXP C, wind TC DL=7.0 psf, wind BC DL=5.0 psf.

Roof overhang supports 2.00 psf soffit load.

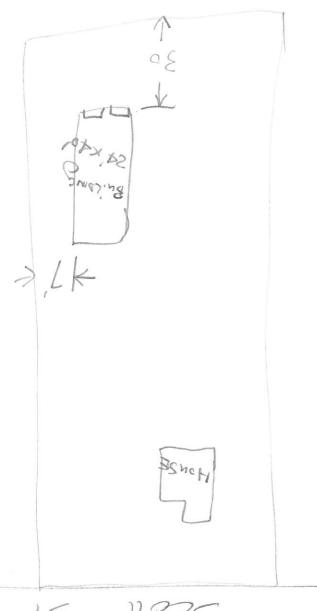
In lieu of rigid celling use purlins to broom BC # 72" DC

dead

Collection meets L/240 live and L/180 total load.



LEFT RAKE - 1.3" PESC. TYP -WAVE URRAINIOS TRUSSES REQUIRE EXTREME CARE IN FAI DERACING REFER TO HIB-91 (HAMACING INSTRU-DERACING REFER TO HIB-91) (HAMACING INSTRU-DERACING REFER TO WHOFING DRA, SUITE SOA TOR TO PERFORMING THE HAMACING HAMACING HAMACING THE DERAC ATTRICHED STRUCTIONER, PRINCES HAMACING THE THE DERAC ATTRICHED STRUCTION FOR THE TOWN OF THE THE 1P11995 (STD) PROVISIONS OF DESIGN: BC LL BC OL TC SPACING TC DUR. KAC TOTYLO 0.1222.24 1.15 45.0psf 25.Opsf 10.Opsf 10.0psf 24.0" 0.Opsf RIGHT RAKE DATE TYPE DRNG LEN. 77131 -0.1250 atic 08-08-2005 24



15 11275

City of Napoleon

BUILDING & ZONING DEPARTMENT

255 W Riverview

(419)592-4010



| Inspection Record | | Page: 1 |
|----------------------------|-------------------|-------------------------|
| Inspection #: INSP2006-14 | 4 | Printed: 2/9/2006 |
| Address: 909 Scott St. | | Reference #: BP2005-180 |
| Napoleon, OH 43 | 3545 | |
| Applicant: Mr. Tommy J Ash | nbaugh | |
| Directions To Parcel: | | |
| Inspection Type: Building | j Final | Date : 1/20/2006 |
| Inspector: Tom Zimmerma | n | Status: Complete |
| Passed? ✓ | | |
| Required Steps: | | |
| Comments: oked building a | nd electric final | |
| Inspection Checklist: | | |
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| Corrections: | | |
| Correction Code: | | Date: |
| Correction Description: | | |
| Status: | | Correction Made Date: |
| Conditions: | | |
| Condition Code: | | Description: |
| Date: | Department: | Status: |
| Other Fields: | | |