

PERMIT

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

Permit No. 104-78 Issued 6/27/78
date

Job Location 603 Strong St.
address

Lot n/a
sub-div or legal discript

Issued By [Signature]
building official

Owner Karl Groll
name tel.

Address 603 Strong St.

Agent VonDeylon Pblg.&Htg. 592-4756
builder-eng.-etc. tel.

Address 1080 Glenwood Ave. Nap. O

Description of Use New furnace & add A.C.

Residential XX(1)
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. XX Alter XX Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$1,450.00

FEES	BASE	PLUS	TOTAL
BUILDING			
<input checked="" type="checkbox"/> ELECTRICAL	\$4.00	-0-	\$4.00
<input type="checkbox"/> PLUMBING			
<input checked="" type="checkbox"/> MECHANICAL	3.00	-0-	3.00
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			\$7.00
LESS MIN. FEES PAID _____ <small>date</small>			-0-
BALANCE DUE.....			\$7.00

ZONING INFORMATION

n/a					
district	lot dimensions	area	front yd	side yds	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) _____ cu. ft.

Electrical: Add 1 circuit for Air Conditioner.
brief description

Plumbing: _____
brief description

Mechanical: Install new furnace.
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: CALL FOR FINAL INSPECTION.

Date 9/12/78 Applicant Signature [Signature]
owner-agent

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR HEATING PERMIT
(PLEASE PRINT OR TYPE)

104-78

The undersigned hereby makes application for the installation, replacement or alteration of a heating system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Mechanical Code for 1, 2 and 3 Family Buildings.

Owner's Name KARL GROLL Address 603 STRONG ST

Contractor's Name VON DUYLEN PBLG+HTG Address 1080 GLENNWOOD Tel. 532 4716

BUILDING INFORMATION:

Single Family Double Family _____ Multiple _____ New Construction _____

Addition _____ Remodel _____ Replacement No. of Stories _____

DESCRIPTION OF WORK

Heating System - Warm Air Hot Water _____ Steam _____ Electric _____

Unit Heaters _____ Unit Gas Heaters _____ Other _____

Type - Gravity _____ Forced Radiant _____

No. of Thermostatical Heating Zone ONE

Hot Water - One Pipe _____ Two Pipe _____ Series Loop _____

Electric Heat - No. of Circuits _____ Other _____

Total Heat Loss of Area to be Heated 53,000 Btu

Rated Capacity of Furnace/Boiler 52,000 INPUT Btu

No. of Furnaces ONE No. of Hot Air Runs 6

No. of Hot Water Radiators _____ Type of Fuel NAT GAS

Heating Units Located: Crawl Space _____ Floor Level _____ Suspended _____

Roof or Exposed to Outside Air _____ Attic _____ Other _____

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: LOCATION OF FURNACE OR UNIT HEATERS AND SIZE AND LOCATION OF FEEDER DUCTS AND RETURN AIR DUCTS. ALL PLANS SHALL BE DRAWN TO SCALE.

ESTIMATED COST OF COMPLETED PROJECT: \$ 1450.00

DATE 6/26/78 APPLICANT'S SIGNATURE Elden In Deylen

OWNER-CONTRACTOR-AGENT

31.21
4/23

CITY OF NAPOLEON
BUILDING INSPECTION DEPARTMENT
APPLICATION FOR ELECTRICAL PERMIT
(PLEASE PRINT OR TYPE)

The undersigned hereby makes application for the installation, replacement, or alteration of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Code for 1, 2 and 3 Family Buildings.

Owner's Name KARL GROLL Address 603 ST LOUIS Tel. _____

Contractor's Name VON DOYLEN BLDG & HE Address 1080 GLENWOOD Tel. (92-4)176

LOT INFORMATION:

Location of Project _____ Zoning District _____

BUILDING INFORMATION:

Single Family Double Family _____ Multiple Family _____

New Construction _____ Existing Addition _____

Replacement _____ Remodel _____ Service Change _____

Size: Total Square Foot Per Floor _____ No. of Stories _____

DESCRIPTION OF WORK

Size of Service 30 AMP. Service Change Only _____ (Yes or No)

Total Number of New Circuits _____ Total Number of New Circuits
Excluding Appliance Circuits _____

APPLIANCE CIRCUITS: (indicate quantity)

Electric Range _____ Range Hood _____ Clothes Dryer _____ Dishwasher _____

Air Conditioner Attic Fan Blower _____ Room Exhaust Fan _____

Disposal _____ Hot Water Heater _____ Electric Oven _____

Require Temporary Electric _____ (Yes or No)

Note: G.F.I.C. required for all temporary electric with approved ground rod at service

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELECTRICAL LAY-OUT AND RISER DIAGRAM.

ESTIMATED COST OF COMPLETED PROJECT: _____

DATE 6/26/78 APPLICANT'S SIGNATURE Evan Deegan
OWNER-CONTRACTOR-AGENT

