

**PERMIT**

**CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING**

**255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010**

Permit No. 100 Date July 28, 1980  
 Job Location 422 E. Washington Valuation \$ 500.00  
Address  
 Owner Clair Johnson Address 422 E. Washington  
Name  
 Contractor Clair Johnson Telephone No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 Electric Contractor \_\_\_\_\_  
 Plumbing Contractor \_\_\_\_\_  
 Mechanical Contractor \_\_\_\_\_

**This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.**

**Work Information:**

Residential  Commercial \_\_\_\_\_ Industrial \_\_\_\_\_  
No. dwelling units  
 New Construction \_\_\_\_\_ Addition  Remodel \_\_\_\_\_  
 Brief Description of Work Enclosing back porch

ISSUED BY Richard J. Hayman DEPT. OF BUILDING & ZONING  
Building Official

**It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:**

- \_\_\_\_\_ Footing excavation prior to placing concrete.
- \_\_\_\_\_ Footing drains and foundation prior to backfill.
- \_\_\_\_\_ Prepared sub-grade prior to placing concrete floor slab.
- \_\_\_\_\_ Sanitary sewer
- Rough-in electrical, plumbing and service framing prior to installing wall board.
- Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

**PERMIT & FEES**

Building Permit	\$ <u>3.00</u>
Electrical Permit	\$ <u>5.00</u>
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ <b>PAID</b>
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ <b>CITY OF NAPOLEON</b>
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____
<b>TOTAL FEES</b>	\$ <u>8.00</u>
<b>LESS FEES PAID</b>	\$ <u>-0-</u>
<b>BALANCE DUE</b>	\$ <u>8.00</u>

**Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.**

CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR BUILDING PERMIT  
(please print or type)

The undersigned hereby makes application for construction, installation, or alteration work as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Building Codes.

Location of project REAR OF HOUSE Cost of project 500<sup>00</sup>

Owner's Name CLAIR JOHNSON Address 422 E. WASH.

Contractor NONE Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

Lot Information: (not required for siding job)

Lot No. \_\_\_\_\_ Subdivision \_\_\_\_\_

Zoning District \_\_\_\_\_ Lot Size \_\_\_\_\_ ft. Area \_\_\_\_\_ sq. ft.

Setbacks: Front \_\_\_\_\_ Right Side \_\_\_\_\_ Left Side \_\_\_\_\_ Rear \_\_\_\_\_

Work Information:

Residential  Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New Construction \_\_\_\_\_ Addition  Remodel \_\_\_\_\_

Accessory Building \_\_\_\_\_ Siding \_\_\_\_\_

(Specific Type)

Brief Description of Work: ENCLOSING back PORCH

Size: Length 10 Width 5 No. of Stories \_\_\_\_\_

Area: 1st Floor \_\_\_\_\_ sq. ft. Basement \_\_\_\_\_ sq. ft.

2nd Floor \_\_\_\_\_ sq. ft. Accessory Building \_\_\_\_\_ sq. ft.

3rd Floor \_\_\_\_\_ sq. ft. Other \_\_\_\_\_ sq. ft.

Additional Information: \_\_\_\_\_

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELEVATIONS, FLOOR PLANS, CROSS SECTIONS AND PLOT PLAN. IF ADDITION OR REMODELING, SHOW ALL EXISTING STRUCTURES AND THEIR SIZE AND LOCATION. ALL PLANS SHALL BE DRAWN TO SCALE.

Date \_\_\_\_\_ Applicants Signature \_\_\_\_\_

INSP - MARKED

PERMIT NO. \_\_\_\_\_

PERMIT FEE \$ 3.00

CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR ELECTRICAL PERMIT  
(please print or type)

The undersigned hereby makes application for installation or replacement of electrical equipment as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Electrical Codes.

Owner's Name CLAIR JOHNSON Address 422 E. Wash.

Electrical Contractor NONE Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

General Contractor NONE Telephone No. \_\_\_\_\_

Address \_\_\_\_\_

Location of Project REAR OF HOUSE Cost of Project —

Work Information:

Residential  Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ No. Units \_\_\_\_\_ Service Change \_\_\_\_\_ Rewiring \_\_\_\_\_ Additional Wiring

Brief Description of Work: put in two outlets

Size of proposed service entrance \_\_\_\_\_ Number of new circuits \_\_\_\_\_

Type of proposed service entrance \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_

Require Temporary Electric \_\_\_\_\_ (Yes of No)

Total Floor Area - Commercial and Industrial only \_\_\_\_\_ sq. ft.

Additional Information: \_\_\_\_\_

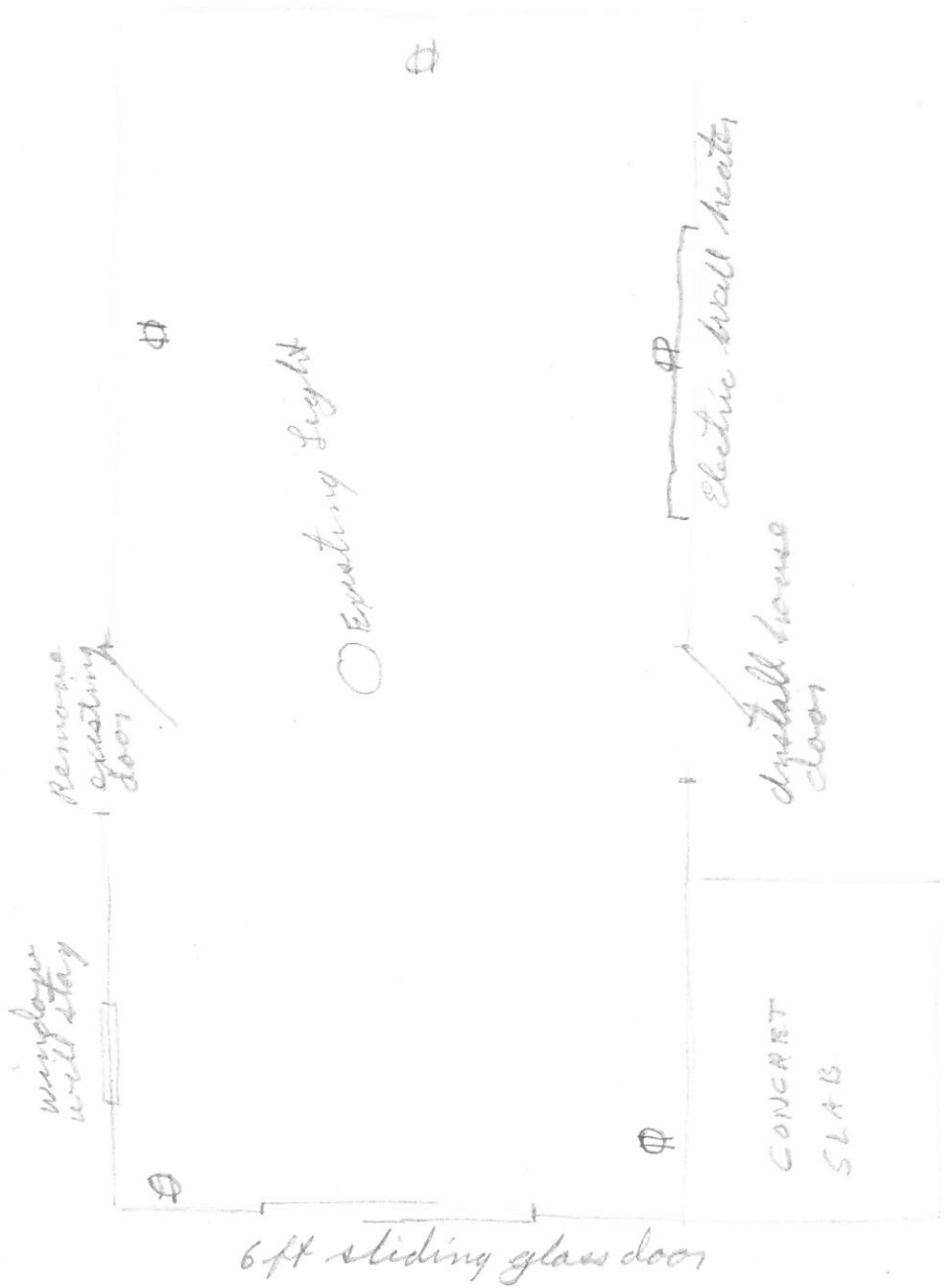
\*GROUND FAULT CIRCUIT INTERRUPTER PROTECTION IS REQUIRED ON ALL 120-VOLT SINGLE PHASE, 15 and 20 AMP. CIRCUITS WHICH ARE PART OF A TEMPORARY ELECTRIC SERVICE; AND ALSO ON BATHROOM, OUTDOOR, AND GARAGE RECEPTACLES IN ALL DWELLING UNITS. Art. 210-8 N.E.C.

\*APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF PLANS INCLUDING: ELECTRICAL LAYOUT AND RISER DIAGRAM. (FOR COMMERCIAL AND INDUSTRIAL WORK ONLY).

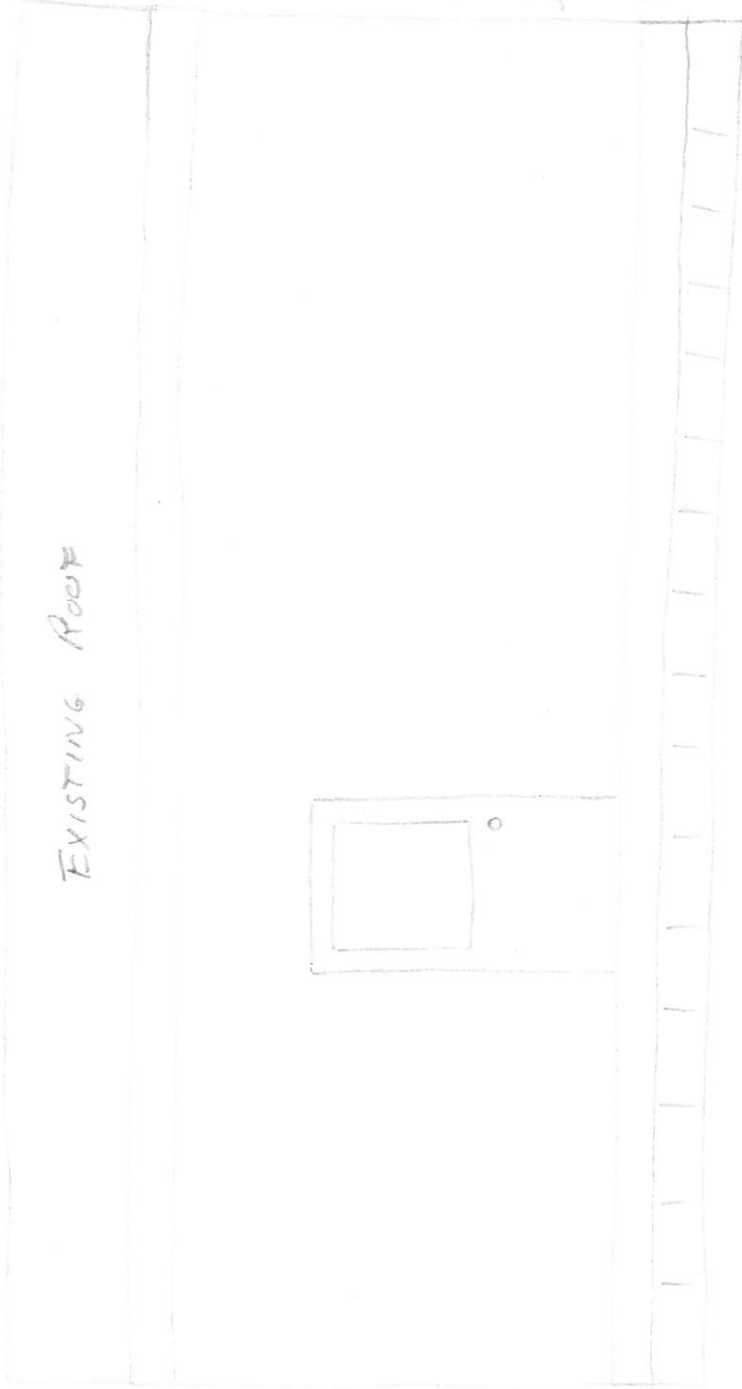
Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

PERMIT NO. 182

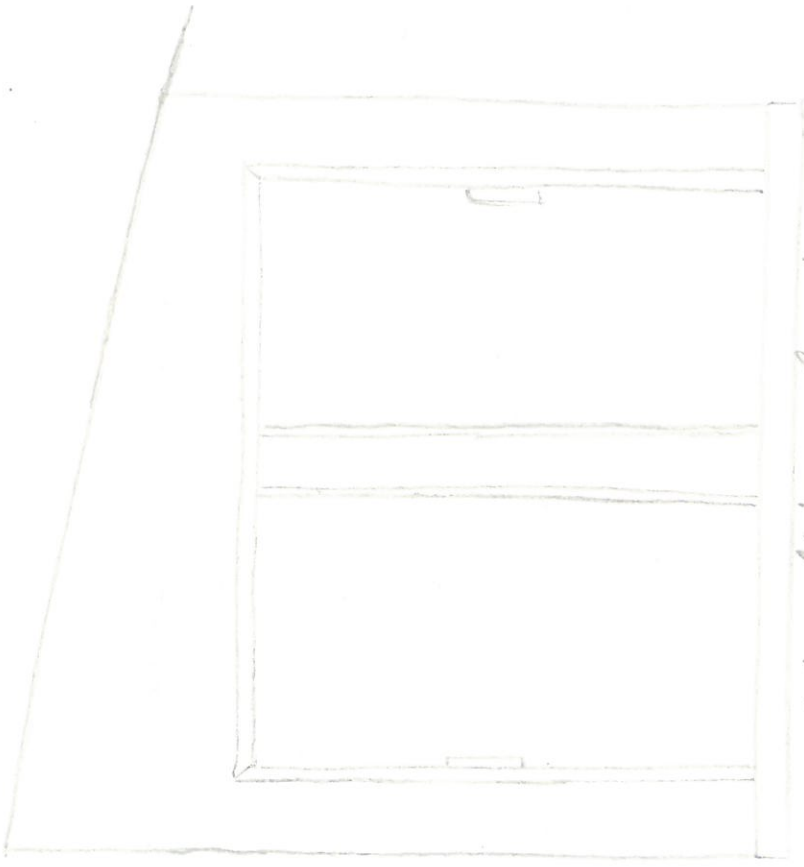
PERMIT FEE \$ 5.00



EXISTING ROOF



2x4 Studs  
16 inches on center  
Double plait on  
top of studs and  
single plate on  
bottom  
Existing posts  
Supporting roof  
to be removed  
Celotex Sheathing  
4 inch bat insulation  
insulation in  
walls  
6 inch bat insulation  
in ceiling  
Vigoro siding  
to match house



6ft sliding glass door

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