

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

Permit No. 3487 Issued 03/21/95
 Job Location 517 E. Washington St.
 Lot _____
 Issued by Brent N. Damman
 Owner Josie & Susan B ^{Martinez} Montiny
592-0547
 Address 517 E. Washington St.
 Agent Self
 Address _____
 Use Type - Residential X
 Other - Describe _____
 No. Dwelling Units _____
 New _____ Replacement _____
 Add'n. X Alter _____ Remodel _____
 Mixed Occupancy _____
 Change of Occupancy _____
 Estimated Cost \$ 16,000.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>60.00</u>	\$ <u>69.00</u>
<input checked="" type="checkbox"/> Electrical	\$ _____	\$ <u>15.00</u>	\$ <u>15.00</u>
<input checked="" type="checkbox"/> Plumbing	\$ _____	\$ <u>9.00</u>	\$ <u>9.00</u>
<input checked="" type="checkbox"/> Mechanical	\$ _____	\$ <u>8.00</u>	\$ <u>8.00</u>
<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. Elec.	\$ _____	\$ _____	\$ _____
TOTAL FEES.....			\$ <u>101.00</u>
LESS FEES PAID.....			\$ _____
BALANCE DUE.....			\$ _____

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 15'2" Stories 1 Ground Floor Area 540
 Height 14' Building Volume (for Demo. Permit) _____

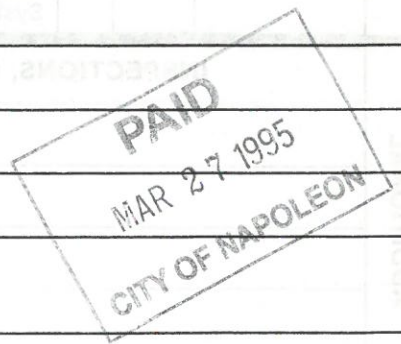
Electrical: _____

Plumbing: _____

Mechanical: _____

Additional Information: Family room & bedroom addition

Date 3-21-95 Applicant Signature Josie Martinez



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	6/19	BD			Exterior Lath			Demolition (sewer cap)			
	Footings & Reinforcing	6/19	BD			<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard						
	Floor Slab			Interior Wall Construction		Fire Wall(s)			Building or Structure			
	Foundation Walls	8/18	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)	11/6	BD			FINAL APPROVAL BLDG. DEPT.			
			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, 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. 3487 ISSUED 3-21-95

JOB LOCATION 517-E. Washington

LOT _____
 (Subdivision or Legal Description)

ISSUED BY BND
 (Building Official)

OWNER Josée Susan B. Montine PHONE 592-0547

ADDRESS 517-E. Washington Napoleon, Oh

AGENT Self PHONE _____

ADDRESS _____

USE: Residential Commercial Industrial
 Other _____

WORK: New Addition Replacement Remodel

ESTIMATED COST = \$ 16,000.00

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
<input checked="" type="checkbox"/> Building	\$ <u>9.00</u>	\$ <u>60.00</u>	\$ <u>69.00</u>
<input checked="" type="checkbox"/> Electrical	\$ _____	\$ <u>15.00</u>	\$ <u>15.00</u>
<input checked="" type="checkbox"/> Plumbing	\$ _____	\$ <u>9.00</u>	\$ <u>9.00</u>
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<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Water	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Elec.	\$ _____	\$ _____	\$ _____

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

TOTAL FEES	\$ <u>101.00</u>
Less Fees Paid	\$ _____
BALANCE DUE	\$ <u>101.00</u>

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>

<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Ldg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>

WORK INFORMATION

Building: Ground Floor Area 540 sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.
 Size: Length 36' Width 15'2" Stories 1 Height 14'
 Building Volume (for Demolition Permit) _____ cubic feet
 Description of Work: Family room + bed room addition.

ELECTRICAL: Contractor _____ Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: () New () Service Change () Rewiring (X) Add'l Wiring TEMPORARY ELEC. REQUIRED - () Yes () No
Size of Service _____ Underground _____ Overhead _____ Number of New Circuits 5

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 = 1 Bathtubs = _____ Showers = 1 Lavatories = 1 Kitchen Sinks = _____ Disposal = _____
Clothes Washer = _____ Floor Drains = _____ Dishwasher = _____ Other _____ Total = 3

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 4

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: _____

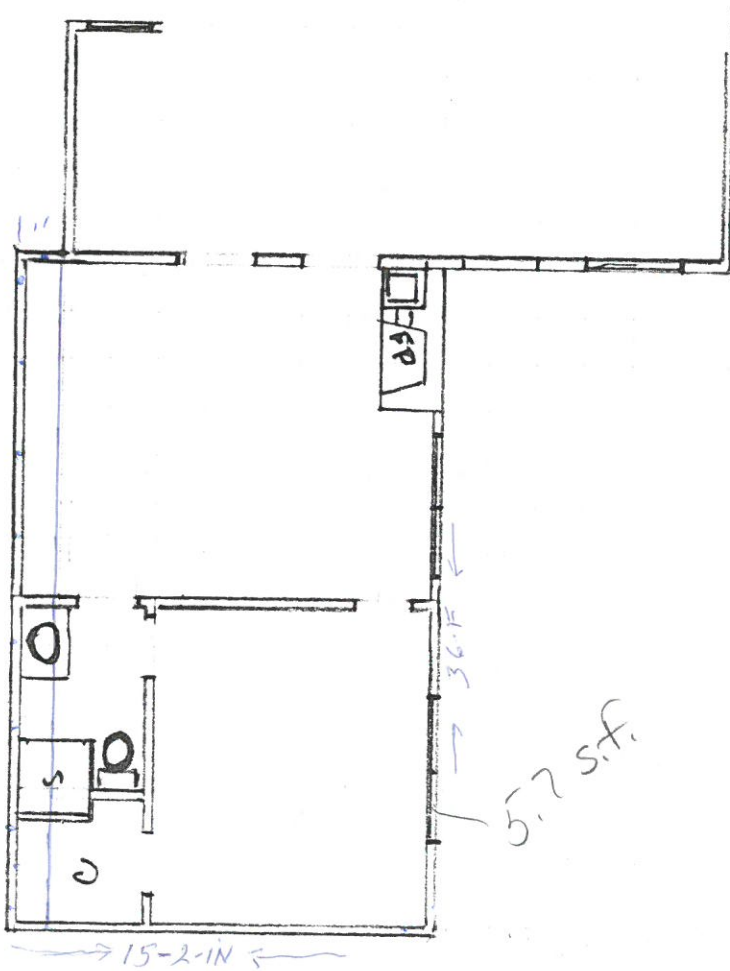
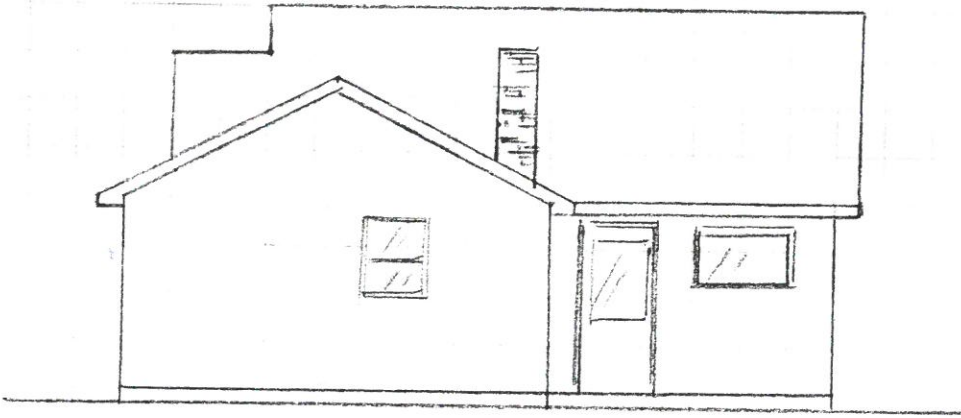
DRAWINGS REQUIRED: All applications must be accompanied by two (2) complete sets of Drawings including Site Plans, Foundation Plans, Floor Plans, Structural Framing Plans, Exterior Elevations, Section and Details, Stair Details, Electrical Layout, Plumbing Isometric, Heating Layout, etc. All Plans shall 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 _____ **Date** _____

PLAN Scale $\frac{1}{4}'' = 2ft$

517 E. Washington



336
15
480
36
540
90
16200

