

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 168-79 Date Nov. 23, 1979
Job Location 430 W. Washington Valuation \$ 7,000.00
Owner Richard Schwiebert Address 430 W. Washington
Contractor Hamler Lumber Co. Telephone No. 274-3541
Address Hamler, Ohio
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 X One Commercial _____ Industrial _____
No. dwelling units
New Construction _____ Addition _____ Remodel X
Brief Description of Work Reside house with vinyl, cover all windows, and
facias.

ISSUED BY R.E. Johnson Building Official REL. DEPT. OF BUILDING & ZONING

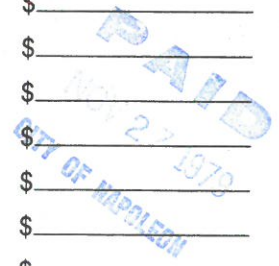
It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- _____ 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.
- X Final building inspection, prior to occupancy.

PERMIT & FEES

Building Permit	\$ <u>19.50</u>
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____

TOTAL FEES \$ 19.50
LESS FEES PAID \$ -0-
BALANCE DUE \$ 19.50



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.

PERMIT
 CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
 225 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. _____ Date _____
 Job Location _____ Valuation \$ _____
 Owner _____ Address _____
 Contractor _____ 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 ordinances and land use codes and ordinances.

Work Information: Residential _____ Commercial _____ Industrial _____
 New Construction _____ Addition _____
 Description of Work _____
 ISSUED BY: *[Signature]*
 DEPT. OF BUILDING & ZONING

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PERMIT & FEES	
Building Permit	\$ 150.00
Electrical Permit	\$ 50.00
Plumbing Permit	\$ 50.00
Mechanical Permit	\$ 50.00
Demolition Permit	\$ 50.00
Zoning Permit	\$ 50.00
Sign Permit	\$ 50.00
Water Tap	\$ 50.00
Sewer Tap	\$ 50.00
Temp. Elec.	\$ 50.00
Other	\$ 50.00
TOTAL FEES	\$ 1,000.00
LESS FEES PAID	\$ 0.00
BALANCE DUE	\$ 1,000.00

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

The undersigned hereby makes application for construction, installation, or alternation 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 X Cost of Project 7,000⁰⁰

Owner's Name RICHARD SCHWIEBERT Address 430 WEST WASHINGTON

Contractor HAMLER LBR Co Telephone No. 274-3541

Address HAMLER OHIO

Lot Information: (not required for siding job)

Lot No. _____ Subdivision _____

Zoning District _____ Lot Size _____ ft X _____ ft. Area _____ sq. ft.

Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:

Residential ONE Commercial _____ Industrial _____

New Construction _____ Addition _____ Remodel

Accessory Building _____ Siding BIRD 8" UINGL

Brief Description of Work: RESIDE HOUSE w/ UINGL, COVER

ALL WINDOWS & FACIAS ~~FACIAS~~ ~~NEW SPOUING~~

Size: Length _____ Width _____ 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 11/21/79 Applicant's Signature Arnold Berkes

PERMIT NO.

168

79

PERMIT FEE \$

1950

PERMIT

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ISSUED BY R.S. [Signature] DEPT. OF BUILDING & ZONING
Building Official

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Temp. Elec.	\$ _____
Other _____	\$ _____
TOTAL FEES	\$ <u>19.50</u>
LESS FEES PAID	\$ <u>-0-</u>
BALANCE DUE	\$ <u>19.50</u>

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INSPECTION RECORD

UNDERGROUND		ROUGH-IN			FINAL			
Type	Date	By	Type	Date	By	Type	Date	By
PLUMBING								
Sewer Connection			Drainage, W. & Vent			Drainage, W. & Vent		
Building Sewer			Water Piping			Water Heater		
Water Piping			Condensate Lines			Backflow Prevention		
			Indirect Waste					
ELECTRICAL								
Floor Ducts Raceways			Rough Wiring			FINAL APPROVAL		
Conduits & Cable			Conduits/Cable			Electric Mtr. Clearance		
Grounding & Bonding			Service Panel			Signs		
			Switchboard					
			Subpanels					
			<input type="checkbox"/> Range <input type="checkbox"/> Dryer			FINAL APPROVAL		
MECHANICAL								
Refrigerant Piping			Refrigerant Piping			Duct Insulation		
Ducts/Plenums			Ducts/Plenums			Chimney(s)		
			Ventilation			Furnace(s)		
			<input type="checkbox"/> Supply					
			<input type="checkbox"/> Exhst.			FINAL APPROVAL		
BUILDING								
Location, Set-backs, Esmt(s)			Wall Construction			Fireplace Chimney		
Excavation			Crawl Space			Attic		
			<input type="checkbox"/> Vent <input type="checkbox"/> Access			<input type="checkbox"/> Vent <input type="checkbox"/> Access		
Footings & Reinforcing			Floor System(s)			Special Insp Reports Rec'd		
Sub-soil Drain			Roof System			Smoke Detector		
Foundation Walls			Fire Wall(s)			Demolition (sewer cap)		
Floor Slab			Roof Cover			Building or Structure		
			Roof Drain					
FINAL APPROVAL BLDG. DEPT			Certificate of Occupancy Issued			#		

7/24/80

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*Fees are not valid until all fees are paid in full, and shall be void if not stated within six months of date above.

BALANCE DUE \$

LESS FEES PAID \$

TOTAL FEES \$

Other _____
 Temp Elec _____
 Sewer Tap _____
 Water Tap _____
 Sign Permit _____
 Zoning Permit _____
 Demolition Permit _____
 Mechanical Permit _____
 Plumbing Permit _____
 Electrical Permit _____
 Building Permit _____

PERMIT & FEES