

P E R M I T

CITY OF NAPOLEON
255 W. RIVERVIEW AVE
NAPOLEON, OHIO 43545

DIVISION OF BUILDING & ZONING
PH (419) 592-4010
FAX (419) 599-8393

PERMIT NO: 1045 DATE ISSUED: 03-21-02 ISSUED BY: MRD
JOB LOCATION: 743 W WASHINGTON ST EST. COST: 10000.00

LOT #: SUBDIVISION NAME:
OWNER: MCGINN, KELLY AGENT: CLAIR PLBG & HTG
ADDRESS: 743 W WASHINGTON ST ADDRESS: 401 PLEASANT ST
CSZ: NAPOLEON, OH 43545 CSZ: ARCHBOLD, OH 43502
PHONE: 419-592-4483 PHONE: 419-446-9212

USE TYPE - RESIDENTIAL: OTHER:

ZONING INFORMATION

DIST: LOT DIM: AREA: FYRD: SYRD: RYRD:
MAX HT: # PKG SPACES: # LOADING SP: MAX LOT COV:

BOARD OF ZONING APPEALS:

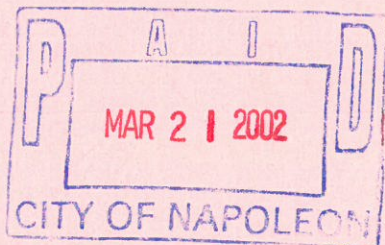
WORK TYPE - NEW: REPLMNT: ADD'N: ALTER: REMODEL: X

WORK INFORMATION

SIZE - LGTH: WIDTH: STORIES: LIVING AREA SF:
GARAGE AREA SF: HEIGHT: BLDG VOL DEMO PERMIT:

WORK DESCRIPTION
REMODEL AND UPGRADE
BATHROOM

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
PLUMBING PERMIT		9.00
WATER TAP PERMIT		60.00



TOTAL FEES DUE 69.00

3-21-02

DATE

Kelly McGinn

APPLICANT SIGNATURE

CITY OF NAPOLEON INSPECTION FORM

PERMIT #: 1045

DATE ISSUED: 03-21-2002

JOB LOCATION: 743 W WASHINGTON ST

OWNER: MGINN, KELLY

OWNER PHONE: 419-592-4483

CONTRACTOR: CLAIR PLBG & HTG

CONTRACTOR PHONE: 419-446-9212

WORK DESCRIPTION: REMODEL AND UPGRADE

PLUMBING: UNDGR _____ RGHIN _____ FINAL 4-4-02
SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN _____ FINAL _____
FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN _____ FINAL _____
SERV UPGR _____

BUILDING: SITE _____ FTG _____ FNDDT _____
STRUC _____ ROOF _____ EXT _____
VENT _____ ACCES _____ EGRS _____
SMKDT _____ FINAL _____
ISSUE TEMP OCCUP _____ ISSUE OCCUP _____

STRG SHED: SITE _____ FINAL _____

SIGN: FTG _____ FINAL _____

FENCE: SITE _____ FINAL _____

MISC INSP: Water service line & Tracer wire - 3-21-02

NOTES: _____

INSPECTOR INITIALS: BMD

CITY OF NAPOLEON

WATER METER YOKE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" WATER METER YOKE ASSEMBLY
(Please pickup at City Operations Department 1775 Industrial Drive).

PERMIT #: 1045

ISSUED: 03-21-2002

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WATER TAP SIZE 1" 1.5" _____ 2" _____ OTHER _____

WATER METER YOKE SIZE 5/8" _____ 3/4" 1" _____ OTHER _____

NEW STRUCTURE _____ EXISTING STRUCTURE LAWN METER _____

WATER SERVICE LINE TO BE TYPE "K" COPPER OR "CTS" POLYETHELENE TUBING
OF 1" MINIMUM SIZE.

BACKFLOW DEVICE REQUIRED YES NO _____

TYPE OF BACKFLOW DEVICE REQUIRED Double check valve
assembly

WATER METER YOKE INSTALLATION IS SUBJECT TO THE FOLLOWING CONDITIONS

- 1.) MUST BE LOCATED IN AN ACCESSIBLE AREA.
- 2.) MUST BE IN AN AREA WHICH IS NOT SUBJECT TO FREEZING TEMPERATURES.
- 3.) MUST BE AT LEAST 18" ABOVE FLOOR LEVEL (NO CRAWL SPACE INSTALLATIONS).
- 4.) MUST COMPLY WITH MINIMUM MOUNTING REQUIREMENTS (DRAWING AVAILABLE)

ISSUED BY _____ RECEIVED BY _____

1-Copy to: Building Dept, Water Dept, and Utilities Dept