

PERMIT

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

Permit No. 01530 Issued 4-18-88
date

Job Location 744 W. Washington
address

Lot 52 Sheffields 2nd Add.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Tim Betts
name tel.

Address 744 W. washington

Agent Small-McClure Builders 533-3967
builder-eng.-etc. tel.

Address P.O. Box 253 - Liberty Center

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. _____ Alter _____ Remodel

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 3,220.00

ZONING INFORMATION N.A.

district B	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: N.A.

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: N.A. brief description

Plumbing: N.A. brief description

Mechanical: N.A. brief description

Sign: N.A. type Dimensions _____ Sign Area _____

Additional Information: Replace existing with new roof.

PAID

APR 22 1988

Date 4-22-88 Applicant Signature *Alvin M. Small*
owner-agent

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	9.00	27.00	36.00
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> PLUMBING			
<input type="checkbox"/> MECHANICAL			
<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.....			36.00
LESS MIN. FEES PAID _____			
BALANCE DUE.....			

INSPECTION REPORT

	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						Exterior Lath			Demolition (sewer cap)		
	Footings & Reinforcing						<input type="checkbox"/> Interior Lath <input type="checkbox"/> Wallboard					
	Floor Slab			Interior Wall Construction			Fire Wall(s)			Building or Structure		
	Foundation Walls			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)						FINAL APPROVAL BLDG. DEPT.		11/5-24
				Roof System			Special Insp Reports Rec'd			Certificate of Occupancy Issued		
ADDITIONAL	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					

PERMIT

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

01570

Permit No. [REDACTED] Issued 4-11-98 date

Job Location 794 W. WASHINGTON address

Lot 52 SHEFFIELDS 2ND ADD sub-div or legal discript

Issued By F building official

Owner TIM BETTS name tel.

Address 794 W. WASHINGTON

Agent SMALL-MCCLORE DOLORS builder-eng etc. tel. 531-3967

Address PO BOX 253 LIBERTY OHIO

Description of Use RESIDENCE OHIO

Residential 1 no dwelling units

Commercial _____ Industrial _____

New _____ Add'n _____ Alter _____ Remodel X

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 3220.00

FEES	BASE	PLUS	TOTAL
BUILDING	9.00	27.00	36.00
ELECTRICAL			
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs	Elect. _____ hrs	
TOTAL FEES.....			36.00
LESS MIN. FEES PAID _____			
BALANCE DUE.....			

ZONING INFORMATION NA

district <u>B</u>	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: NA

Size: Length _____ Width _____ Stories _____ Ground Floor Area _____

Height _____ Building Volume (for demo. permit) _____ cu. ft.

Electrical: NA brief description

Plumbing: NA brief description

Mechanical: NA brief description

Sign: NA Dimensions _____ Sign Area _____

Additional Information: REPLACR EXISTING WITH NEW ROOF

Date _____ Applicant Signature _____ owner-agent

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 744 W. WASHINGTON ST. Cost of project 3220⁰⁰
Owner's Name TIM. BETTS Address 744 W. WASHINGTON ST
Contractor SMALL - M'CLURE BUILDERS Telephone No. 533-3967
Address PO BOX 253 LIBERTY CENTER

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 ROOF Commercial _____ Industrial _____

New Construction _____ Addition _____ Remodel _____

Accessory Building _____ Siding _____

Brief Description of Work: ----- TEAR-OFF AND REPLACE ROOF (Specific Type)

Size: Length 2300 sq ft width _____ No. of Stories 2

Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.

2nd Floor _____ sq. ft. Accessory Bldg. _____ 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 4-8-88 Applicant's Signature Glenn M. Small

PERMIT NO. _____
PERMIT FEE \$ _____

