

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

Permit No. 3333 Issued 06/07/94

Job Location 165 Westwood

Lot _____

Issued by Brent N. Damman

Owner Rick Fellers 599-4857

Address 165 Westwood Napoleon, OH

Agent Mock/buehrer

Address 1227 Dodd Napoleon, OH

Use Type - Residential X

Other - Describe _____

No. Dwelling Units _____

New _____ Replacement _____

Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 43,000.00

| FEE'S | BASE | PLUS | TOTAL |
|--|----------|-----------|-----------|
| <input checked="" type="checkbox"/> Building | \$ 9.00 | \$ 114.00 | \$ 123.00 |
| <input checked="" type="checkbox"/> Electrical | \$ 15.00 | \$ 30.00 | \$ 45.00 |
| <input checked="" type="checkbox"/> Plumbing | \$ 9.00 | \$ 6.00 | \$ 15.00 |
| <input checked="" type="checkbox"/> Mechanical | \$ 18.00 | \$ 6.00 | \$ 24.00 |
| <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..... | | | \$ 207.00 |
| 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 _____ Width _____ Stories _____ Ground Floor Area _____

Height _____ Building Volume (for Demo. Permit) _____

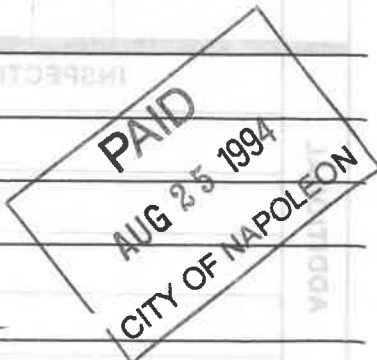
Electrical: _____

Plumbing: _____

Mechanical: _____

Additional Information: Family & Utility room addition

Date 6-7-94 Applicant Signature Richard M. Fellers



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 | | | | | | 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. | | |
| | | | Roof System | | | Special Insp Reports Rec'd | | | Certificate of Occupancy Issued | | | |
| ADDITIONAL | INSPECTIONS, CORRECTIONS, ETC. | | | | | | INSPECTIONS, CORRECTIONS, ETC. | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

8/30/94 Req

8/24/94 Req
8/29/94 Req

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. 3333 ISSUED 6-7-94

JOB LOCATION 165 Westwood

LOT _____
 (Subdivision or Legal Description)

ISSUED BY BND
 (Building Official)

OWNER Rick Fellers PHONE 599-4857

ADDRESS 165 Westwood Napoleon

AGENT Mark / Buchner PHONE _____

ADDRESS 1227 Dodd Napoleon

USE: Residential Commercial Industrial
 Other _____

WORK: New Addition Replacement Remodel

ESTIMATED COST = \$ 43,000.00

| | <u>Base</u> | <u>Plus</u> | <u>Total</u> |
|----------------|-----------------|------------------|------------------|
| (X) Building | \$ <u>9.00</u> | \$ <u>114.00</u> | \$ <u>123.00</u> |
| (X) Electrical | \$ <u>15.00</u> | \$ <u>30.00</u> | \$ <u>45.00</u> |
| (X) Plumbing | \$ <u>9.00</u> | \$ <u>6.00</u> | \$ <u>15.00</u> |
| (X) Mechanical | \$ <u>18.00</u> | \$ <u>6.00</u> | \$ <u>24.00</u> |
| () Demolition | \$ _____ | \$ _____ | \$ _____ |
| () Zoning | \$ _____ | \$ _____ | \$ _____ |
| () Sign | \$ _____ | \$ _____ | \$ _____ |
| () Water Tap | \$ _____ | \$ _____ | \$ _____ |
| () Sewer Tap | \$ _____ | \$ _____ | \$ _____ |
| () Temp Water | \$ _____ | \$ _____ | \$ _____ |
| () Temp Elec. | \$ _____ | \$ _____ | \$ _____ |

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

TOTAL FEES \$ 207.00
 Less Fees Paid \$ _____
 BALANCE DUE \$ 207.00

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 _____ sq. ft. Basement Floor Area _____ sq. ft.
 Garage Floor Area _____ sq. ft. 2nd Floor Area _____ sq. ft. Other _____ sq. ft.
 Size: Width _____ Length _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: Family + utility room addition.

ELECTRICAL: Contractor Tom Spaiser Elec. Phone _____
Address _____ ESTIMATED COST = \$ _____

Type of Work: New Service Change Rewiring Add'l Wiring TEMPORARY ELEC. REQUIRED - Yes No
Size of Service 200 Underground _____ Overhead _____ Number of New Circuits 10

Description of Work: _____

PLUMBING: Contractor Meyers P+H 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 = _____ Bathtubs = _____ Showers = _____ Lavatories = _____ Kitchen Sinks = _____ Disposal = _____
Clothes Washer = _____ Floor Drains = _____ Dishwasher = _____ Other _____ Total = _____

Description of Work: _____

MECHANICAL: Contractor Meyers P+H 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 1 Number of Hot Air Runs 3
Number of Hot Water Radiators _____ Total Heat Loss 60,000 Rated Capacity of Furnace/Boiler 75,000
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 _____