

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: 1298

DATE ISSUED: 08-28-02

ISSUED BY: MRD

JOB LOCATION: 1485 WILLIAMSBURG AVE

EST. COST: 240000.00

LOT #: 77

SUBDIVISION NAME: TWIN OAKS 5TH

OWNER: HASTEDT, JIM
ADDRESS: 1485 WILLIAMSBURG AVE
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-9350

AGENT: MOCK BUEHRER BUILDER
ADDRESS: P-707 CO RD 16
CSZ: NAPOLEON, OH 43545
PHONE: 419-592-0825

USE TYPE - RESIDENTIAL: X

OTHER:

ZONING INFORMATION

DIST: R-1 LOT DIM: 100X16 AREA: 16312 FYRD: 40 SYRD: 15 RYRD: 20
MAX HT: 45 # PKG SPACES: 2 # LOADING SP: MAX LOT COV: 30%

BOARD OF ZONING APPEALS:

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

WORK INFORMATION

SIZE - LGTH: 69 WIDTH: 63 STORIES: 2 LIVING AREA SF: 5528
GARAGE AREA SF: 996 HEIGHT: 35 BLDG VOL DEMO PERMIT:

WORK DESCRIPTION

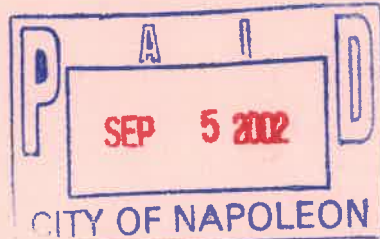
NEW HOME

FEE DESCRIPTION

PAID DATE

FEE AMOUNT DUE

BUILDING PERMIT
ELECTRICAL PERMIT
PLUMBING PERMIT
MECHANICAL PERMIT
WATER TAP PERMIT
SEWER PERMIT



349.00
160.00
63.00
46.00
685.00
257.00

TOTAL FEES DUE 1560.00

9-6-02

DATE

Nancy Bucher

APPLICANT SIGNATURE

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 #: 1298

ISSUED: 08-28-2002

JOB LOCATION: 1485 WILLIAMSBURG AVE

OWNER: HASTEDT, JIM

PHONE: 419-592-9350

ADDRESS: 1485 WILLIAMSBURG AVE NAPOLEON, OH 43545

CONTRACTOR: MOCK BUEHRER BUILDERS

ADDRESS: P-707 CO RD 16 NAPOLEON, OH 43545

PHONE: 419-592-0825

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

CITY OF NAPOLEON

WATER METER YOKE RELEASE FORM

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PERMIT #: 1298

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CONTRACTOR: MOCK BUEHRER BUILDERS

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

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TYPE OF BACKFLOW DEVICE REQUIRED _____

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WATER METER YOKE RELEASE FORM

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PHONE: 419-592-9350

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ISSUED BY _____ RECEIVED BY _____

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

CITY OF NAPOLEON

ELECTRIC METER BASE RELEASE FORM

THIS DOCUMENT ENTITLES THE HOLDER TO "ONE" ELECTRIC METER BASE
(Please pickup at the City operations garage 1775 Industrial Drive).

PERMIT #: 1298

ISSUED:08-28-2002

JOB LOCATION: 1485 WILLIAMSBURG AVE

WORK DESCRIPTION: NEW HOME

OWNER: HASTEDT, JIM

ADDRESS: 1485 WILLIAMSBURG AVE NAPOLEON, OH 43545

OWNER PHONE: 419-592-9350

CONTRACTOR: MOCK BUEHRER BUILDERS

ADDRESS: P-707 CO RD 16 NAPOLEON, OH 43545

CONTRACTOR PHONE: 419-592-0825

ELECTRIC SERVICE UPGRADE _____ NEW SERVICE INSTALLATION X

INDUSTRIAL _____ COMMERCIAL _____ RESIDENTIAL X 1PHASE X 3PHASE _____

SIZE OF SERVICE 100AMP _____ 150AMP _____ 200AMP X 400AMP _____ OTHER _____

HUB SIZE - 1 1/4" _____ 1 1/2" _____ 2" _____

DESIRED VOLTAGE 120/240 X OTHER _____

UNDERGROUND SERVICE X OVERHEAD SERVICE _____

=====

DATE COMPLETED: _____ APPROVED BY: _____

OLD METER NUMBER: _____ NEW METER NUMBER: _____

COMMENTS:

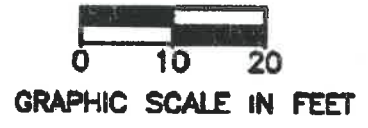
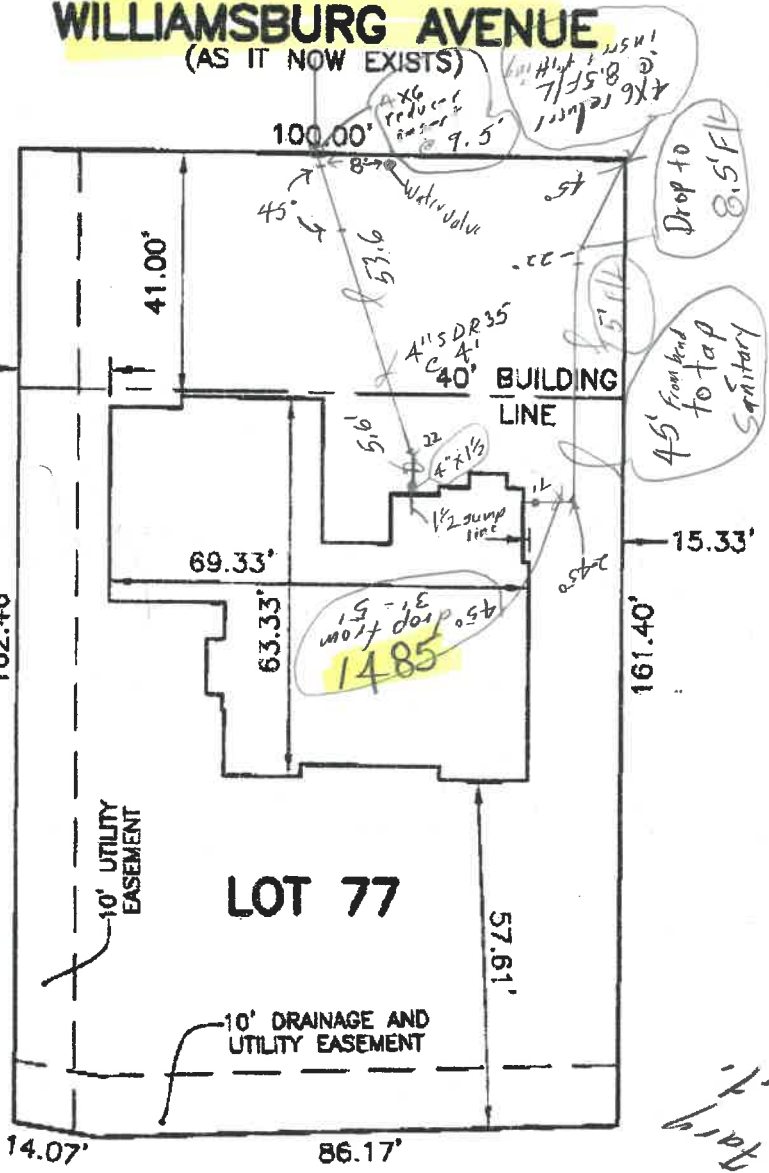
PLOT PLAN

LOT 77 OF TWIN OAKS SUBDIVISION 5TH ADDITION, CITY OF NAPOLEON, HENRY COUNTY, OHIO

PREPARED FOR AND AT THE REQUEST OF:
MOCK-BUEHRER BUILDERS, LTD.

WILLIAMSBURG AVENUE
(AS IT NOW EXISTS)

Storm



MLG

*Storm & Sanitary
by Miller Conrt.
Forest Town
10-2-02*

Feller Finch & Associates, Inc.
Engineers - Surveyors
1883 Woodlands Drive P.O. Box 88 Maumee, Ohio 43537-0088
Phone: (419)893-3680
Fax: (419)893-2982
DATE: 17/12/02 PROJECT NO.: 10S03949

APPLICATION FOR

Residential, Building, Electrical, Plumbing, Mechanical, and Demolition Permit
FCM - 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. _____ ISSUED _____

JOB LOCATION _____

LOT _____
 (Subdivision or Legal Description)

ISSUED BY _____
 (Building Official)

OWNER _____ PHONE _____

ADDRESS _____

AGENT _____ PHONE _____

ADDRESS _____

USE: () Residential () Commercial () Industrial
 () Other _____

WORK: () New () Addition () Replacement () Remodel

ESTIMATED COST = \$ _____

	<u>Base</u>	<u>Plus</u>	<u>Total</u>
(X) Building	\$ 237.00	\$ 112.00	\$ 349.00
(X) Electrical	\$ 15.00	\$ 145.00	\$ 160.00
(X) Plumbing	\$ 9.00	\$ 54.00	\$ 63.00
() Mechanical	\$ 36.00	\$ 10.00	\$ 46.00
() Demolition	\$ _____	\$ _____	\$ _____
() Zoning	\$ _____	\$ _____	\$ _____
() Sign	\$ _____	\$ _____	\$ _____
(X) Water Tap	\$ 680.00	\$ 5.00	\$ 685.00
(X) Sewer Tap	\$ 197.00	\$ 60.00	\$ 257.00
() Temp Water	\$ _____	\$ _____	\$ _____
() Temp Elec.	\$ _____	\$ _____	\$ _____

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

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

ZONING INFORMATION

<u>District</u>	<u>Lot Dimensions</u>	<u>Area</u>	<u>Front Yard</u>	<u>Side Yard</u>	<u>Rear Yard</u>
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<u>Max Height</u>	<u>No. Pkg. Spaces</u>	<u>No. Lqg. Spaces</u>	<u>Max Cover</u>	<u>Petition or Appeal Required-Date</u>
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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: Length _____ Width _____ Stories _____ Height _____
 Building Volume (for Demolition Permit) _____ cubic feet

Description of Work: _____

CITY OF NAPOLEON OHIO PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTIAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMOLITION, REMODELING.

DATE _____ JOB LOCATION 1485 Williamsburg Ave.
LOT # _____ SUBDIVISION NAME _____
OWNER James Harstedt PHONE 592-9750
OWNER ADDRESS 906 Lynn Ave CITY _____ ZIP _____
CONTRACTOR _____ PHONE _____
CONTRACTOR ADDRESS Mock/Buehrer CITY _____ ZIP _____
CONTRACTOR FAX # _____ CELL PHONE (Opt.) _____
DESCRIPTION OF WORK TO BE PERFORMED: New Home
ESTIMATED COST OF WORK TO BE PERFORMED: 240,000.00

WORK INFORMATION

BUILDING: Basement Floor Area 2150 Sq. Ft. 1st Story Living Area 2150 Sq. Ft.
2nd Floor Living Area 1228 Sq. Ft. Garage Floor Area 996 Sq. Ft.

BUILDING SIZE: Length 69 Width 69 Stories 2 Height 35 DEMO VOL _____

Masonry Contractor Miller Const. Phone _____ Fax _____
Address _____ City Archbold St _____ Zip _____

Electrical Contractor Tom Speiser Phone _____ Fax _____
Address _____ City Napoleon St _____ Zip _____

Plumbing Contractor _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

Heating Contractor _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

Insulation Contractor _____ Phone _____ Fax _____
Address _____ City _____ St _____ Zip _____

Other Contractor attach information.

ZONING INFORMATION (to be completed by City): District R-1 Lot Dimensions 100 X 162
Lot Area 16,312 FRSB 40 SYSB 15 RYSB 20 Max Ht 45 ft Max Cov 30 %

I by signing below agree to comply with all applicable City of Napoleon Codes & Ordinances while performing the work herein described. I understand that all work for which a permit is issued is required to be approved by the building inspector of the City of Napoleon.

Applicant Signature _____ Date _____

Elec Meter release
water meter release

Water tap
Insp form

(Copy of Elec. Mtr release
with site plan to Elec
Dept.)

CITY OF NAPOLEON INSPECTION FORM

R-1

PERMIT #: 1298

DATE ISSUED: 08-28-2002

JOB LOCATION: 1485 WILLIAMSBURG AVE

OWNER: HASTEDT, JIM /

OWNER PHONE: 419-592-9350

CONTRACTOR: MOCK BUEHRER BUILDERS

CONTRACTOR PHONE: 419-592-0825

WORK DESCRIPTION: NEW HOME

PLUMBING: UNDGR 9-5-02 RGHIN 1-17-03 FINAL 5-22-03

SEWER INSP _____

MECHANICAL: UNDGR _____ RGHIN 1-16-03 FINAL 5-22-03

FURNACE REPLC _____ AIR COND _____

ELECTRICAL: UNDGR _____ RGHIN 1-16-03 FINAL 5-22-03

SERV UPGR _____

BUILDING: SITE 8-28 FTG 8-28 FNDDT 8-29

STRUC 1-16-03 ROOF 1-16-03 EXT 1-16-03 *exc. brick*

VENT 1-16-03 ACCES _____ EGRS _____

SMKDT _____ FINAL _____

ISSUE TEMP OCCUP _____ ISSUE OCCUP X

STRG SHED: SITE _____ FINAL _____

SIGN: FTG _____ FINAL _____

FENCE: SITE _____ FINAL _____

MISC INSP: _____

NOTES: _____

INSPECTOR INITIALS: BYD

No. 554

CERTIFICATE OF OCCUPANCY
THE CITY OF NAPOLEON
ENGINEERING DEPARTMENT
DIVISION OF INSPECTION

This is to certify that the Building or Land as herein described complies with all the building and health laws and ordinances and with the provisions of the Zoning Ordinance.

Location of Occupancy 1485 Williamsburg Ave. Occupancy ... Single Family

Owner of Property Jim Hastedt Address 1485 Williamsburg Ave.

Issued to Same Address

Zoning R-2 Residential Bldg. Permit No.

Substantial qualifications of occupancy Building Code Compliant

This certificate is issued by the City Building Inspector, as provided by law, and is to certify that construction is completed substantially in conformity with the approved plans and permission is hereby granted to occupy such building in compliance with such legal use and occupancy as authorized under the provisions of the ordinances of the City of Napoleon.

Issued this 16th day of June 192003 Signed [Signature] City Building Inspector

This is a valuable record for owner or lessee and should be so preserved.