

PERMIT

CITY OF NAPOLEON - BUILDING DEPARTMENT

255 West Riverview Avenue, Napoleon, Ohio 43545 - 419-592-4010

Permit No. 01225 Issued 8-15-86
date

Job Location 85 Joliette
address

Lot 68 Riviera Heights Sub. Div.
sub-div or legal discript

Issued By Eldon Huber
building official

Owner Jim Eisaman 592-3911
name tel.

Address 85 Joliette

Agent Beck's Construction 592-8307
builder-eng.-etc. tel.

Address 11622 Rd. M - Napoleon, Ohio

Description of Use Residence

Residential 1
no. dwelling units

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 3,500.00

FEES	BASE	PLUS	TOTAL
<input checked="" type="checkbox"/> BUILDING	3.00	9.00	12.00
<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.....			\$12.00
LESS MIN. FEES PAID _____			
			<small>date</small>
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
A	100' X 105'	10,500 S.F.	30' Min.	7' Min.	15' Min.
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
35' Max.		2-Min.	35% Max.		

WORK INFORMATION:

Size: Length 10' Width 12' Stories 1 Ground Floor Area 120 S.F.

Height 8'6" Building Volume (for demo. permit) _____
cu. ft.

Electrical: _____
brief description

Plumbing: _____
brief description

Mechanical: _____
brief description

Sign: _____ Dimensions _____ Sign Area _____
type

Additional Information: Covered Porch.

PAID
AUG 22 1986
CITY OF NAPOLEON

Date X 8-22-86 Applicant Signature X Frances M. Beck
owner-agent

PERMIT

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

01225

Permit No. 01225 Issued _____ date _____

Job Location 85 JOLIETTE address _____

Lot 68 RIVIERA HEIGHTS SUBDIV, sub-div or legal discript _____

Issued By FH building official _____

Owner JIM EISMAN 592-3911 name _____ tel. _____

Address 85 JOLIETTE _____

Agent BECK'S CONS. 592-8307 builder-eng.-etc. _____ tel. _____

Address 11822 RD M, NAP OH _____

Description of Use RESIDENCE _____

Residential 1 no. dwelling units _____

Commercial _____ Industrial _____

New _____ Add'n. X Alter _____ Remodel _____

Mixed Occupancy _____

Change of Occupancy _____

Estimated Cost \$ 3500.00

FEES	BASE	PLUS	TOTAL
BUILDING	3.00	9.00	12.00
ELECTRICAL			
PLUMBING			
MECHANICAL			
DEMOLITION			
ZONING			
SIGN			
WATER TAP			
SEWER TAP			
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs _____	Elect. _____ hrs _____	
TOTAL FEES.....			12.00
LESS MIN. FEES PAID _____ date _____			
BALANCE DUE.....			

ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
A	100' x 105'	10,500 SF	30' MW	7'-0" MW	15'-0" MW
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr
35' MW	2-MW	35%			

WORK INFORMATION:

Size: Length 10'-0" Width 12'-0" Stories 1 Ground Floor Area 120 SQ. FT.

Height 8'-6" Building Volume (for demo. permit) _____ cu. ft.

Electrical: _____ brief description _____

Plumbing: _____ brief description _____

Mechanical: _____ brief description _____

Sign: _____ Dimensions _____ Sign Area _____

Additional Information: PERM COVERED POURCH

Date _____ Applicant Signature _____ owner-agent _____

592-3911

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 85 Joliette Cost of project \$3,500
Owner's Name Jim Ferguson Address 85 Joliette
Contractor Bee K Const Co Telephone No. 592 8307
Address 1622 Rd M Nap O

Lot Information: (Not required for siding job)
Lot No. _____ Subdivision _____
Zoning District _____ Lot Size ON Site Plan ft. X _____ ft. Area _____ sq. ft.
Setbacks: Front _____ Right Side _____ Left Side _____ Rear _____

Work Information:
Residential Commercial _____ Industrial _____
New Construction _____ Addition _____ Remodel
Accessory Building _____ Siding _____

Brief Description of Work: 10 X 14 Porch (Specific Type)

Size: Length _____ Width _____ No. of Stories _____
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 June 30 1986 Applicant's Signature Robert J. [Signature]

PERMIT NO. _____
PERMIT FEE \$ _____

RESIDENTIAL PLAN CORRECTION SHEET

CITY OF NAPOLEON
55 West Riverview Ave.
Napoleon, Ohio 43545
419/592-4010

ADDENDUM TO Permit No. 01225
Owner JAMES E. FISHER
Contractor BECK'S CONSTRUCTION
Location 55 VOLLETTE

Please note the items checked below and incorporate them into your plans as indicated: PERMIT NOT YET ISSUED, CORRECT PLANS AND RE-SUBMIT. PERMIT ISSUED, INCORPORATE ITEMS DURING CONSTRUCTION.

GENERAL			
<input checked="" type="checkbox"/>	Provide approved smoke detector(s) as req'd.		Show size of members supporting porch roof.
	Provide 1/2" gypsum wallboard between dwelling and garage, on garage side.		Provide double top plate for all bearing partitions and exterior walls.
	Provide min. 1 3/8" solid wood door from garage to dwelling. (or equal)		Provide design data for prefab wood truss.
	Submit fully dimensioned plot plan.		Ceiling joists undersized in _____
<input checked="" type="checkbox"/>	Provide min. of 1-3'0" x 6'8" exit door.		Roof rafters undersized in _____
	Provide min. 22" x 30" attic access opening.		PLUMBING AND MECHANICAL
	Provide min. 18" x 24" crawl space access opening.		Terminate all exhaust systems to outside air.
	Provide approved sheathing or flashing behind masonry veneer.		Insulate ducts in unheated areas.
<input checked="" type="checkbox"/>	Provide min. 15# underlayment on roof.		Provide backflow prevention device on all hose bibs.
	Provide adequate fireplace hearth.		Terminate pressure and temperature relief valve drain in an approved manner.
	Install factory built fireplaces/stoves according to manufacturers instructions.		Provide dishwasher drain with approved air gap device.
	Terminate chimney 2' above roof or 2' above highest point of building within 10' of chimney.		METAL VENEERS
	LIGHT AND VENTILATION		Contact City Utilities Dept. to remove conductors and/or meter.
	Provide mechanical exhaust or window in bathroom		Provide approved system of grounding and bonding.
	Provide min. _____ Sq. In. net free area attic ventilation.		ELECTRICAL
	Provide min. _____ Sq. In. net free area crawl space ventilation.		Show location of service entrance panel and service equipment panel.
	FOUNDATION		G. F. C. I. req'd. on temporary electric.
	Min. depth of foundation below finished grade is 32".		Outdoor, bathroom and garage receptacles shall be protected by G. F. C. I.
	Min. size of footer _____" x _____"		Maximum number of receptacles permitted on a G. F. C. I. circuit shall be 10 for 20 A. circuits and 7 for 15A. circuits.
	Provide anchor bolts 1/2" @ 6' o.c. 1' from each corner. Embedded 7" in concrete and 15" in masonry.		Refrigerators, microwaves, washers, disposal, furnace and air conditioners shall be on separate circuits.
	Show size of basement columns.		INSPECTIONS
	FRAMING		The following indicated inspections are required. The owner or his agent shall contact the City Building Dept. at least 24 hrs prior to the time the inspection is to be made.
	Show size of wood girder in _____	<input checked="" type="checkbox"/>	Footers and Setbacks.
	Provide design data for structural member in _____	<input checked="" type="checkbox"/>	Foundation.
	Floor joists undersized in _____		Building sewer.
	Provide double joists under parallel bearing partitions.		HVAC rough-in.
	Provide 1" x 4" let in corner bracing, approved sheathing, or equal.		Plumbing rough-in. <input checked="" type="checkbox"/>
	Show size of headers for openings over 4' wide		Plumbing final. <input checked="" type="checkbox"/>
			Electrical service.
			Electrical rough-in.
			Electrical final
			Final Building other,

Additional Corrections. EXTEND 2x6 RAFTERS BACK TO WALL LINE UNLESS SUFFICIENT OUTLOOKERS ARE PRESENT

The approval of plans and specifications does not permit the violation of any section of the Building Code or other City Ordinance. This addendum is attached to Permit No. 01225 and made a part thereof. DATE APPROVED OR DISAPPROVED 8-14-86 Checked by EH Plan Examiner.
DATE RECHECKED AND APPROVED _____ Checked by _____

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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 85 Joliette Cost of project [#] 3,850
 Owner's Name James & Reva Cisaman Address 85 Joliette
 Contractor Becks Construction Telephone No. 592-3911
 Address Napoleon, 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 _____ Commercial _____ Industrial _____
 New Construction _____ Addition ✓ 10' x 12' Remodel _____
 Accessory Building _____ Siding _____
 (Specific Type)

Brief Description of Work:-----

Size: Length _____ Width _____ No. of Stories _____
 Area: 1st Floor _____ sq. ft. Basement _____ sq. ft.
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Date 5/5/86 Applicant's Signature Reva G. Cisaman
James W. Cisaman
DRAW PLOT PLAN REVERS SIDE

PERMIT NO. _____ PERMIT FEE \$ _____

