

# PERMIT

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

Permit No. 759-77 Issued 6/21/77  
date

Job Location 860 Maple St.  
address

Pt. Lot 7 C. Montgomery's Add'n.  
sub-div or legal discript

Issued By Ronald D. Sonnenberg  
building official

Owner James Rhome 592-4836  
name tel.

Address 255 Northcrest Drive

Agent Self Same  
builder-eng.-etc. tel.

Address Same

Description of Use Dwelling

Residential XXX(1)  
no. dwelling units

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

New \_\_\_\_\_ Add'n. \_\_\_\_\_ Alter \_\_\_\_\_ Remodel XX

Mixed Occupancy \_\_\_\_\_

Change of Occupancy \_\_\_\_\_

Estimated Cost \$ 2,260.00

FEES	BASE	PLUS	TOTAL
<input type="checkbox"/> BUILDING			
<input checked="" type="checkbox"/> ELECTRICAL	\$11.75	---	\$11.75
<input checked="" type="checkbox"/> PLUMBING	\$3.00	\$5.00	8.00
<input checked="" type="checkbox"/> MECHANICAL	\$6.00	----	6.00
<input type="checkbox"/> DEMOLITION			
<input type="checkbox"/> ZONING			
<input type="checkbox"/> SIGN			
WATER TAP	\$225.00	---	225.00
SEWER TAP	60.00	---	60.00
TEMP. ELECT.			
ADDITIONAL PLAN REVIEW	Struct. _____ hrs		
	Elect. _____ hrs		
TOTAL FEES.....			\$310.75
LESS MIN. FEES PAID _____ <small>date</small>			-0-
BALANCE DUE.....			\$310.75

### ZONING INFORMATION

district	lot dimensions	area	front yd	side yds	rear yd
	n/a				
max hgt	no pkg spaces	no ldg spaces	max cover	petition or appeal req'd	date appr

### WORK INFORMATION:

Size: Length 40' Width 28' Stories 2 Ground Floor Area Approx. 1100sq'

Height \_\_\_\_\_ Building Volume (for demo. permit) \_\_\_\_\_ cu. ft.

Electrical: New service & rewiring.  
brief description

Plumbing: New plumbing.  
brief description

Mechanical: New gas furnace & duct work.  
brief description

Sign: \_\_\_\_\_ Dimensions \_\_\_\_\_ Sign Area \_\_\_\_\_  
type

Additional Information: \_\_\_\_\_

Date 6-27-77 Applicant Signature James A. Rhome  
owner-agent



# RESIDENTIAL PLAN CORRECTION SHEET

**CITY OF NAPOLEON, Building Dept.**  
**255 West Riverview Avenue**  
**Napoleon, Ohio 43545**  
**(419) 592-4010**

**ADDENDUM to Permit No. 759-77**  
**Owner J. RHOME**  
**Location 860 MAPLE ST.**

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 the items during construction.

<p style="text-align: center;"><b>GENERAL</b></p> <p>Provide 1 approved smoke detector.</p> <p>Provide 1 hour fire wall and/or ceiling between garage and dwelling.</p> <p>Provide (Class B) 1 hour fire rated door from garage to dwelling.</p> <p>Submit fully dimensioned plot plan.</p> <p>Provide 1-3'0" x 6'8" exit door.</p> <p>Provide min. 22" x 30" attic access.</p> <p>Provide min. 18" x 24" crawl space access opening.</p> <p style="text-align: center;"><b>LIGHT AND VENTILATION:</b></p> <p>Provide mechanical exhaust or window in bathroom.....</p> <p>Provide Min. _____ sq. in. net free area attic ventilation.</p> <p>Provide min. _____ sq. in. net free area crawl space ventilation.</p> <p style="text-align: center;"><b>FOUNDATION:</b></p> <p>Min. depth of foundation below finished grade 30".</p> <p>Min. size of footer....." x ....."</p> <p>Provide anchor bolts 1/2" @ 8' o.c. 1' from each corner. Embedded 8" concrete and 15" in masonry.</p> <p>Show size of basement columns.</p> <p style="text-align: center;"><b>FRAMING:</b></p> <p>Show size of wood girder in.....</p> <p>Provide design data for structural member in.....</p> <p>Floor joists under sized in.....</p> <p>Provide double joists under parallel partitions.</p> <p>Provide 1" x 4" let in corner bracing or approved sheathing.</p> <p>Show size of headers for openings over 4' wide.</p>	<p>Show size of members supporting porch roof.</p> <p>Provide double top plate.</p> <p>Provide design data for pre-fab. wood truss/members.</p> <p>Ceiling joists undersized in.....</p> <p>Roof rafters undersized in.....</p> <p style="text-align: center;"><b>PLUMBING AND MECHANICAL:</b></p> <p><input checked="" type="checkbox"/> Terminate all exhaust systems to outside air.</p> <p><input checked="" type="checkbox"/> Insulate ducts in unheated areas.</p> <p><input checked="" type="checkbox"/> Provide back flow device on all hose bibs.</p> <p style="text-align: center;"><b>ELECTRICAL:</b></p> <p>Show location of service entrance and service equipment panel.</p> <p>G.F.C.I. req'd. on Temp. Electric.</p> <p><input checked="" type="checkbox"/> Outdoor and bathroom receptacles shall be protected by G.F.C.I.</p> <p style="text-align: center;"><b>METAL VENEERS:</b></p> <p>Contact City Utilities Dept. to remove conductors and/or meter.</p> <p>Provide 18" x 18" x 3/4" wood backer for meter base.</p> <p>Provide approved system of grounding and bonding.</p> <p style="text-align: center;"><b>MISCELLANEOUS:</b></p> <p>Provide backwater valve in sub-soil drain tile.</p> <p>Provide approved sheathing and flashing behind masonry veneer.</p> <p>Provide 15# felt underlayment on roof.</p> <p>Provide adequate fireplace hearth extensions</p> <p>Install factory built fireplaces/stoves according to manufacturers recommendations.</p> <p>Terminate chimney 3' above roof or 2' above highest point of building within 10' of chimney.</p>
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**ADDITIONAL CORRECTIONS:** \_\_\_\_\_

The approval of plans and specifications does not permit the violation of any section of the Building Code, or other City Ordinance or State Law. This addendum is attached to Permit No. 759-77 and made a part thereof.

Date Approved or Disapproved 6/21/77

Checked By Ronald D. Sonnenberg  
Plan Examiner

Date Rechecked and Approved \_\_\_\_\_

Checked By \_\_\_\_\_



Date: 6/21/77

TO: Electric Distribution Superintendent

FROM: The Building Inspector - Building Department

Please confirm the installation of 200 AMP. electrical service entrance, located FILLMORE ST SIDE

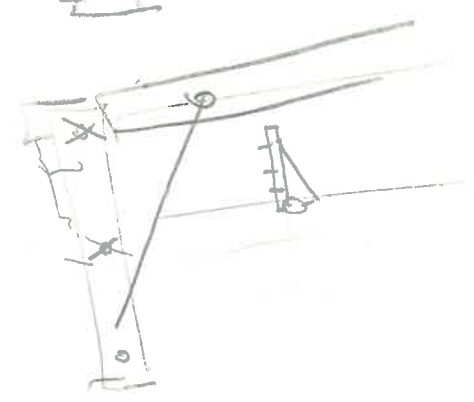
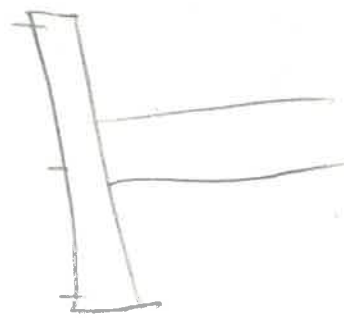
at the following address: 860 MAPLE ST.

Approved  Not Approved

[Signature]  
Electric Supt.

marks: \_\_\_\_\_  
Date JUN 22 - 1977





Distribution Superintendent

Date: 6/21/77

Building Inspector - Building Department

For the proposed installation of 3/4" water tap

RE ST. SIDE

Address: 860 MAPLE ST.

Lot #     

Not Approved

By         

6-22-77

Date

Service 6" Cast Iron Main 4'9"

Curb





\$ 11.75

James Rhone

255 Northcrest Dr. Nap. O.

James Rhone

255 Northcrest Dr. 592-4836  
Napoleon O.

860 Maple ST Nap. O.

✓

✓

✓

✓

✓

1100 Sq FT.

2

200

NO

15

12

✓

✓

✓

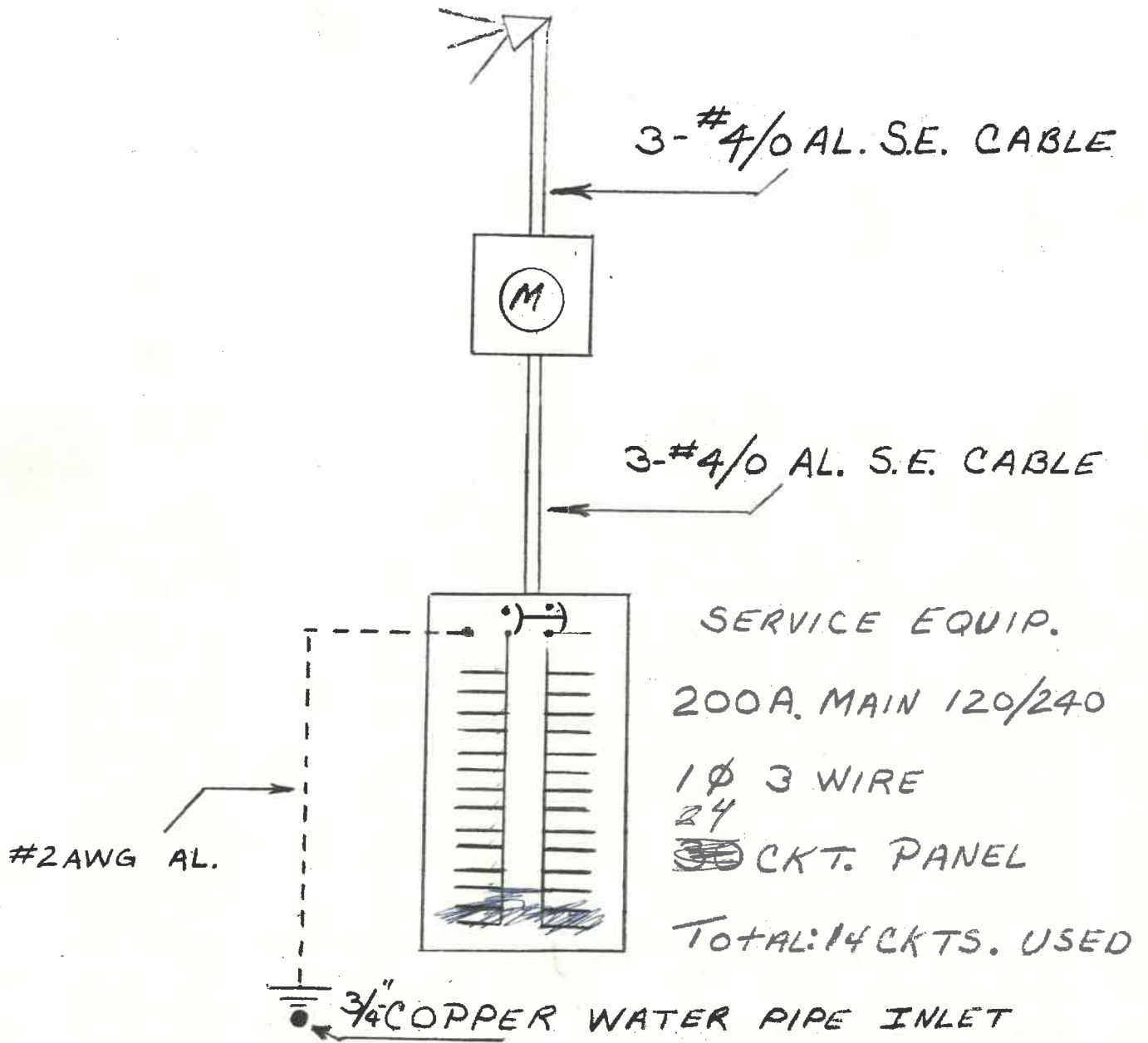
NO

\$ 1125.00

James A. Rhone  
OWNER-CONTRACTOR-AGENT

1/2	3.00
1/2	1.00
1/2	6.75
1/2	1.20
<hr/>	<hr/>
	11.75





CITY OF NAPOLEON  
BUILDING DEPT.

Plan Approval  
By ADD. Date 6/21/77  
WITH ADDENDUM

RISER DIAGRAM



CITY OF NAPOLEON  
BUILDING INSPECTION DEPARTMENT  
APPLICATION FOR PLUMBING PERMIT  
(PLEASE PRINT OR TYPE)

\$8.00

The undersigned hereby makes application for the installation, replacement or alteration of plumbing system or device as herein specified, agreeing to do all such work in strict accordance with the City of Napoleon's adopted Plumbing Code for 1, 2 and 3 Family Buildings.

Owner's Name James Rhome Address 255' Northcrest Dr Nap, O  
Contractor's Name James Rhome Address 255' Northcrest Nap Tel. 5924836

BUILDING INFORMATION:

Single Family  Double Family  Multiple Family  New Construction   
Addition  Remodel  Replacement  No. of Stories 2

DESCRIPTION OF WORK

Drainage Pipe of: Cast Iron  Copper  Other Plastic  
Size of Main Building Drain: 4"  Other 6"  
Size of Main Vent Stack: 3"  4"  Other   
Require Water Tap:  (Yes or No) Require Sewer Tap:  (Yes or No)

Size and Type of Water Tap 3/4"  
Size and Type of Sewer Tap 6" Type of Joints V.F.T. Clay Pipe Joint

No. of Water Closets	<u>1</u>	No. of Sump Pumps	<u>0</u>
No. of Bathtubs	<u>1</u>	No. of Lavatories	<u>1</u>
No. of Kitchen Sinks	<u>1</u>	No. of Automatic Washers	<u>1</u>
No. of Disposals	<u>0</u>	No. of Hot Water Heaters	<u>1</u>
No. of Dishwashers	<u>0</u>	No. of Shower Receptors	<u>0</u>
No. of Floor Drains	<u>0</u>	Other (specify)	<u>NA</u>

Storm Drainage Outlet to: Storm Sewer NA Other

APPLICATION FOR PERMIT SHALL BE ACCOMPANIED BY TWO COMPLETE SETS OF A DRAINAGE ISOMETRIC, WITH ALL PIPES AND TRAPS PROPERLY SIZED. MUST INDICATE TOTAL DRAINAGE FIXTURE UNIT VALUE (dfu).

ESTIMATED COST OF COMPLETED PROJECT: \$1185.00

DATE 6-21-77

APPLICANT'S SIGNATURE James Rhome  
OWNER-CONTRACTOR-AGENT

3.00  
5.00  
8.00



CITY OF NAPOLEON

Engineering Department

ELECTRICAL INSPECTION FIELD REPORT

255 Riverview Avenue

Napoleon, Ohio 43545

(Please Print or Type)

Date 7-7-79  
~~6-9-79~~

Permit No. 759-77

Type of Inspection ROUGH-IN

Type of Occupancy RESIDENCE

Project Name JAMES RONME

Address 860 MAPLE ST.

City NAPOLEON

Approved \_\_\_\_\_ State OH.

Violation \_\_\_\_\_

Remarks:

Electrical Contractor SELF

Code Reference

Locked no entry 6-9-79 10:30 AM

Locked no entry 6-23-79 3:15 PM NHT  
From what I saw see looking in window  
it don't look good.

Locked no entry 7-7-79 N.H.  
How about contacting the man &  
tell him to leave front door unlocked?

No Entry 12-22-79 NHT

Compliance Time \_\_\_\_\_

Issues To: \_\_\_\_\_

Inspectors Signature [Signature]

White - Applicant

Yellow - Engineering





CITY OF NAPOLEON  
 BUILDING INSPECTION DEPARTMENT  
 APPLICATION FOR HEATING PERMIT  
 (PLEASE PRINT OR TYPE)

\$6.00

The undersigned hereby makes application for the installation, replacement or alteration of a heating system or device as herein specified, agreement to do all such work in strict accordance with the City of Napoleon's adopted Mechanical Code for 1, 2 and 3 Family Buildings.

Owner's Name James Rhone Address 255 Northcrest Dr Nap. O  
 Contractor's Name James Rhone Address 255 Northcrest Dr Tel. 572-4816

BUILDING INFORMATION:

Single Family  Double Family \_\_\_\_\_ Multiple \_\_\_\_\_ New Construction \_\_\_\_\_  
 Addition  Remodel  Replacement \_\_\_\_\_ No. of Stories 2

DESCRIPTION OF WORK

Heating System - WATER AIR  Hot Water \_\_\_\_\_ Steam \_\_\_\_\_ Electric \_\_\_\_\_  
 Unit Heaters \_\_\_\_\_ Unit Gas Heaters 1 Other \_\_\_\_\_  
 Type - Gravity \_\_\_\_\_ Forced  Radiant \_\_\_\_\_  
 No. of Thermostatical Heating Zone \_\_\_\_\_  
 Hot Water - One Pipe NA Two Pipe NA Series Loop NA  
 Electric Heat - No. of Circuits NA Other \_\_\_\_\_

Total Heat Loss of Area to be Heated \_\_\_\_\_  
 Rated Capacity of Furnace/Boiler 135,000 BTU  
 No. of Furnaces 1 No. of Hot Air Runs \_\_\_\_\_  
 No. of Hot Water Radiators NA Type of Fuel NAT GAS  
 Heating Units Located: Crawl Space \_\_\_\_\_ Floor Level  Suspended \_\_\_\_\_  
 Roof or Exposed to Outside Air NA \_\_\_\_\_

