

PERMIT

CITY OF NAPOLEON, OHIO — DEPT. OF BUILDING & ZONING
255 W. Riverview Avenue, Napoleon, Ohio 43545 (419) 592-4010

Permit No. 825 Date 25 May 1984
Job Location 1122 Oakwood Valuation \$ _____
Address
Owner Earl Richardson Address 1122 Oakwood Avenue
Name
Contractor Owner Telephone No. 592-6412
Address _____
Electric Contractor _____
Plumbing Contractor _____
Mechanical Contractor _____

This permit is issued for work described in the plans, specifications, and/or application submitted, as approved by the Building Commissioner of the City of Napoleon, Ohio. Work shall conform to all pertinent construction and land use Codes and Ordinances.

Work Information:

Residential R4 Commercial _____ Industrial _____
No. dwelling units
New Construction _____ Addition _____ Remodel _____
Brief Description of Work Deck

ISSUED BY Richard H. Hayman DEPT. OF BUILDING & ZONING
Building Official

It is the owners or contractors responsibility to call the Building Department for the following (X) inspections:

- Footing excavation prior to placing concrete.
- Footing drains and foundation prior to backfill.
- Prepared sub-grade prior to placing concrete floor slab.
- Sanitary sewer
- Rough-in electrical, plumbing and service framing prior to installing wall board.
- Final electrical, plumbing and heating.
- Final building inspection, prior to occupancy.

PERMIT & FEES

Building Permit	\$ 6.00
Electrical Permit	\$ _____
Plumbing Permit	\$ _____
Mechanical Permit	\$ _____
Demolition Permit	\$ _____
Zoning Permit	\$ _____
Sign Permit	\$ _____
Water Tap	\$ _____
Sewer Tap	\$ _____
Temp. Elec.	\$ _____
Other _____	\$ _____

TOTAL FEES \$ 6.00
LESS FEES PAID \$ _____
BALANCE DUE \$ 6.00

PAID
MAY 18 1984
CITY OF NAPOLEON

Permit is not valid until all fees are paid in full, and shall be void if work is not started within six months of date above.

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 _____ Cost of project _____
 Owner's Name EARL RICHARDSON Address 1122 Oakwood
 Contractor SELF Telephone No. 592-6412
 Address _____

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 _____ Remodel _____
 Accessory Building _____ Siding _____

Brief Description of Work: ----- DECK (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.

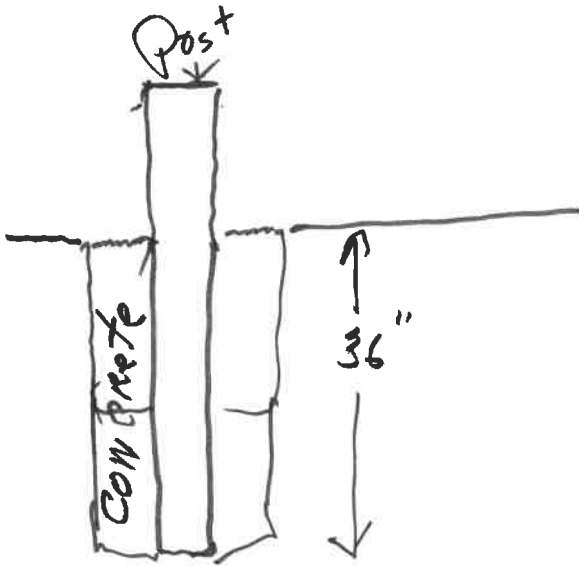
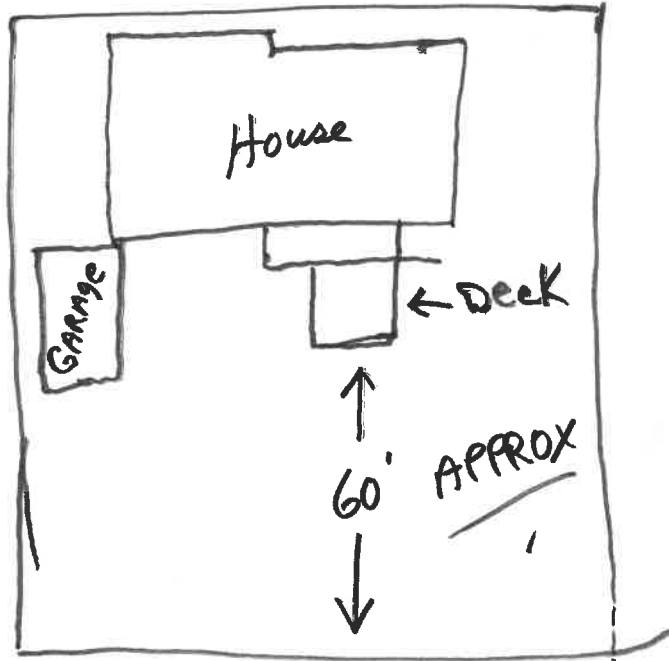
Additional Information: _____

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 5-18-84 Applicant's Signature Earl Richardson

PERMIT NO: 895
 PERMIT FEE \$ 6.00

Street



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MAY 18 1984
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INSPECTION RECORD

UNDERGROUND		ROUGH-IN & FINAL				
Type	Date	By	Type	Date	By	
PLUMBING	Sewer Connection		Drainage, W. & Vent			
	Building Sewer		Water Heater			
	Water Piping		Backflow Prevention			
			Indirect Waste			
ELECTRICAL	Floor Ducts Raceways		Rough Wiring		FINAL APPROVAL	
	Conduits & Cable		Conduits/Cable		Electric Mtr. Clearance	
	Grounding & Bonding		Service Panel Switchboard		Signs	
			Subpanels			
MECHANICAL	Refrigerant Piping		<input type="checkbox"/> Range <input type="checkbox"/> Dryer		FINAL APPROVAL	
	Ducts/Plenums		Refrigerant Piping		Duct Insulation	
			Ventilation <input type="checkbox"/> Supply		Chimney(s)	
			<input type="checkbox"/> Exhst.		Furnace(s)	
BUILDING	Location, Set-backs, Esmt(s)		Wall Construction		FINAL APPROVAL	
	Excavation		Crawl Space <input type="checkbox"/> Vent <input type="checkbox"/> Access		Fireplace Chimney	
	Footings & Reinforcing		Floor System(s)		Attic <input type="checkbox"/> Vent <input type="checkbox"/> Access	
	Sub-soil Drain		Roof System		Special Insp Reports Rec'd	
	Foundation Walls		Fire Wall(s)		Smoke Detector	
	Floor Slab		Roof Cover/ Roof Drain		Demolition (sewer cap)	
	FINAL APPROVAL BLDG. DEPT		Certificate of Occupancy Issued		Building or Structure	#