

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

Permit No. <u>2474</u> Issued <u>10-7-91</u>	FEES	BASE	PLUS	TOTAL
Job Location <u>1129 Oakwood</u>	<input checked="" type="checkbox"/> Building	\$ 9.00	\$ 48.00	\$ 57.00
Lot _____	<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
Issued by <u>Brent N. Damman</u>	<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
Owner <u>Jackie Vondenbrock</u>	<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
Address <u>1129 Oakwood, Napoleon, Ohio</u>	<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
Agent <u>Kutzli Construction</u>	<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
Address <u>105 Wabash, Liberty Center, Ohio 43532</u>	<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
Use Type - Residential <u>xx</u>	<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
Other - Describe _____	<input type="checkbox"/> Sew. Insp.	\$ _____	\$ _____	\$ _____
No. Dwelling Units <u>1</u>	<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
New _____ Replacement _____	<input type="checkbox"/> Temp. Water	\$ _____	\$ _____	\$ _____
Add'n. _____ Alter _____ Remodel <u>xx</u>	<input type="checkbox"/> Temp. Elec.	\$ _____	\$ _____	\$ _____
Mixed Occupancy _____	TOTAL FEES.....\$ 57.00			
Change of Occupancy _____	LESS FEES PAID..10-7-91...\$ 57.00			
Estimated Cost \$ <u>10,202.00</u>	BALANCE DUE.....\$ 0.00			

**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: New Siding, Replacement Windows and Doors.

Date 10-7-91 Applicant Signature [Signature]

**PAID**  
**OCT 07 1991**  
 CITY OF NAPOLEON

# INSPECTION RECORD

	UNDERGROUND			ROUGH-IN						FINAL		
	Type	Date	By	Type	Date	By	Type	Date	By	Type	Date	By
<b>PLUMBING</b>	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		
<b>MECHANICAL</b>	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		
<b>ELECTRICAL</b>	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		
<b>BUILDING</b>	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			
<b>ADDITIONAL</b>	INSPECTIONS, CORRECTIONS, ETC.						INSPECTIONS, CORRECTIONS, ETC.					

**APPLICATION FOR  
Residential Building, Electrical, Plumbing, Mechanical & Demolition Permits  
from the  
CITY OF NAPOLEON - BUILDING DEPARTMENT  
255 West Riverview Ave., Napoleon, Ohio 43545 (419) 592-4010**

PERMIT NO. 2474 ISSUED 10-7-91  
 JOB LOCATION 1129 Oakwood  
 LOT \_\_\_\_\_ SUB-DIV \_\_\_\_\_  
 ISSUED BY BND  
 OWNER Jackie Vandebroek PN  
 ADDRESS 1129 Oakwood  
 AGENT Kutali Construction PN  
 ADDRESS 105 Wabash Liberty Center  
 DESCRIPTION OF USE:  
 RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ INDUSTRIAL \_\_\_\_\_  
 \_\_\_\_\_ NEW \_\_\_\_\_ ADDITION \_\_\_\_\_ ALTER  REMODEL \_\_\_\_\_  
 MIXED OCCUPANCY \_\_\_\_\_  
 CHANGE OF OCCUPANCY \_\_\_\_\_  
 ESTIMATED COST \$ 10,202.00  
 ZONING INFORMATION:

	Base	Plus	Total
<input checked="" type="checkbox"/> Building	\$ 9.00	\$ 48.00	\$ 57.00
<input type="checkbox"/> Electrical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Plumbing	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Mechanical	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Demolition	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Zoning	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sign	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Water Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Sewer Tap	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Water	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Temp Elec	\$ _____	\$ _____	\$ _____
Total Fees .....			\$ 57.00
Less Fees Paid .....			\$ _____
BALANCE DUE .....			\$ 57.00

District	Lot Dimensions		Area	Front Yard	Side Yard	Rear Yard
Max Hgt	No. Pkg Spaces	No. Ldg Spaces	Max Cover	Petition or Appeal Required and Date		

**WORK INFORMATION:**  
 Building: Garage Floor Area \_\_\_\_\_ Basement Floor Area \_\_\_\_\_ Second Floor Area \_\_\_\_\_  
 Size: Length \_\_\_\_\_ Width \_\_\_\_\_ Stories \_\_\_\_\_ Ground Floor Area \_\_\_\_\_ Height \_\_\_\_\_  
 Building Volume (for Demolition Permit) \_\_\_\_\_ cu. ft.  
 DESCRIPTION OF WORK: New Siding replacement windows & Doors

**PAID**

**OCT 07 1991**

**ELECTRICAL:** Electrical Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Estimated Cost:\$ \_\_\_\_\_

Type of Work: New \_\_\_ Service Change \_\_\_ Rewiring \_\_\_ Add'l Wiring \_\_\_ Temp Elec Req.: Yes \_\_\_ No \_\_\_

Size of Service \_\_\_\_\_ Underground \_\_\_\_\_ Overhead \_\_\_\_\_ No. of New Circuits \_\_\_\_\_

Description of Work: \_\_\_\_\_

**PLUMBING:** Plumbing Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Estimated Cost:\$ \_\_\_\_\_

Water Tap Req.: Yes \_\_\_ No \_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Water Dist. Pipe \_\_\_\_\_

San. Sewer Tap Req.: Yes \_\_\_ No \_\_\_ Size \_\_\_\_\_ Type of Pipe \_\_\_\_\_ Dr. Waste Vt. Pipe \_\_\_\_\_

St. Sewer Tap Req.: Yes \_\_\_ No \_\_\_ Size \_\_\_\_\_ 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 \_\_\_ Dishwasher \_\_\_\_\_

Clothes Washer \_\_\_ Floor Drains \_\_\_ Other (Fixtures/Type) \_\_\_\_\_

Description of Work: \_\_\_\_\_

**MECHANICAL:** Mechanical Contractor \_\_\_\_\_ 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 \_\_\_\_\_

No. of Heat Zones: \_\_\_\_\_ Hot Water: (One Pipe \_\_\_\_\_ Two Pipe \_\_\_\_\_ Series Loop \_\_\_\_\_)

Electric Heat: (No. of Circuits \_\_\_\_\_) No. of Furnaces \_\_\_\_\_ No. of Hot Air Rms \_\_\_\_\_

No. of Hot Water Radiators \_\_\_\_\_ Total Heat Loss \_\_\_\_\_ Rated Capacity of Furnace/Boiler \_\_\_\_\_

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 also, 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.

Dated \_\_\_\_\_ Signature of Applicant \_\_\_\_\_