

**PERMIT**

City of Napoleon  
255 W. Riverview  
Napoleon, OH 43545

Division of Building and Zoning  
PH (419) 592-4010  
FAX (419) 599-8393

Permit No: 002487

Date Issued: 12-09-04

Issued by: MBS

Job Location: 203 E BARNES AVE

Est. Cost: 2500.00

Lot #:

Subdivision Name:

Owner: SLAGLE, MILDRED  
Address: 203 E BARNES AVE  
CSZ: NAPOLEON, OH 43545  
Phone:

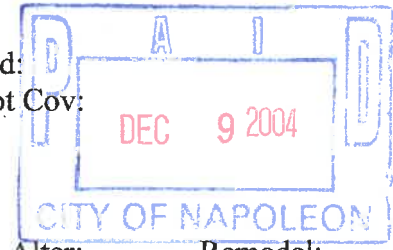
Agent: ELLING PLBG & HTG  
Address: T-487 ST HWY 108  
CSZ: NAPOLEON, OH 43545  
Phone: 419-598-8991

Use Type – Residential:

Other:

**ZONING INFORMATION**

Dist: Lot Dim: Area: Fyrd: Syrd: Ryrd:  
Max HT: # Pkg Spaces: # Loading SP: Max Lot Cov:



**BOARD OF ZONING APPEALS:**

Work Type – New: Replmnt: X Addn'n: Alter: Remodel:

**WORK INFORMATION**

Size - Lgth: Width: Stories: Living Area SF:  
Garage Area SF: Height: Bldg Vol Demo Permit:

**WORK DESCRIPTION**  
FURNACE REPLACEMENT

FEE DESCRIPTION	PAID DATE	FEE AMOUNT DUE
MECHANICAL PERMIT		5.00

Total Fees Due 5.00

12-9-04  
Date

Carl Elling  
Applicant Signature

F

City of Napoleon Inspection Form

Permit #002487

Date Issued: 12-09-2004

Job Location: 203 E BARNES AVE

Owner: SLAGLE, MILDRED

Owner Phone: 13493

Contractor:

Contractor Phone:

Work Description: ME

Plumbing:    UNDGR \_\_\_\_\_            RGHIN \_\_\_\_\_            FINAL \_\_\_\_\_

SEWER INSP \_\_\_\_\_

Mechanical:   UNDGR \_\_\_\_\_            RGHIN \_\_\_\_\_            FINAL \_\_\_\_\_

FURNACE REPLAC 12-09-04            AIR COND \_\_\_\_\_

Electrical:    UNDGR \_\_\_\_\_            RGHIN \_\_\_\_\_            FINAL \_\_\_\_\_

SEVR UPGR \_\_\_\_\_

Building:      Site \_\_\_\_\_            FTG \_\_\_\_\_            FNDDT \_\_\_\_\_

STRU \_\_\_\_\_            ROOF \_\_\_\_\_            EXT \_\_\_\_\_

VENT \_\_\_\_\_            ACCES \_\_\_\_\_            EGRS \_\_\_\_\_

SMKDT \_\_\_\_\_            FINAL \_\_\_\_\_

ISSUE TEMP OCCUP \_\_\_\_\_            ISSUE OCCUP \_\_\_\_\_

STGE Shed:    SITE \_\_\_\_\_            FINAL \_\_\_\_\_

Sign:            FTG \_\_\_\_\_            FINAL \_\_\_\_\_

Fence:          SITE \_\_\_\_\_            FINAL \_\_\_\_\_

DRIVEWAY: \_\_\_\_\_            SIDEWALK: \_\_\_\_\_

MISC INSP: \_\_\_\_\_

NOTES:

Furnace Replacement

INSPECTORS INITIALS: TZ

# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: \_\_\_\_\_ JOB LOCATION: \_\_\_\_\_

OWNER: Mildred Slagle PHONE: 419-592-9436

OWNER ADDRESS: 203 E Barnes CITY: Nap. ZIP: 43545

CONTRACTOR: Elling's Plb + Htg PHONE: 419-598-8991

CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON? YES: \_\_\_\_\_ NO: \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: Furnace replacement

ESTIMATED COST OF WORK TO BE PERFORMED: 2500<sup>00</sup>

### PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- |   |   |
|---|---|
| <input type="checkbox"/> A/C ADD ON                     | <input type="checkbox"/> REMODELING     |
| <input type="checkbox"/> BOILER REPLACEMENT             | <input type="checkbox"/> ROOFING        |
| <input type="checkbox"/> CURBING                        | <input type="checkbox"/> SEWER REPAIRS  |
| <input type="checkbox"/> DECKS *                        | <input type="checkbox"/> SIDEWALK*      |
| <input type="checkbox"/> DRIVEWAY*                      | <input type="checkbox"/> SIDING         |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE     | <input type="checkbox"/> SIGN           |
| _____ # of new circuits                                 | <input type="checkbox"/> STORAGE SHED*  |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW         | <input type="checkbox"/> STREET BOND    |
| _____ # of circuits                                     | <input type="checkbox"/> SWIMMING POOL* |
| <input type="checkbox"/> FENCE*                         | <input type="checkbox"/> TEMP ELECTRIC  |
| <input type="checkbox"/> ADDITIONS*                     | <input type="checkbox"/> WATER TAP      |
| <input checked="" type="checkbox"/> FURNACE REPLACEMENT | <input type="checkbox"/> WINDOWS        |
| <input type="checkbox"/> FURNACE NEW                    | _____ # of windows                      |
| <input type="checkbox"/> LAWN METER                     | <input type="checkbox"/> ZONING         |
| <input type="checkbox"/> PLUMBING                       |   |
| <input type="checkbox"/> OTHERS: _____                  |   |

\*PLEASE MAKE A PICTURE ON REVERSE SIDE SHOWING MEASUREMENTS FROM EXISTING STRUCTURES AND PROPERTY LINES. INDICATING THE TYPE OF WORK YOU WISH TO PERFORM.