

# THE CITY OF NAPOLEON

## BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

### Plumbing Permit

Permit Number: PL2006-9

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Printed: 2/17/2006

**Property Address: 985 Clairmont Ave.**

#### Applicant

**Address:** CF Plumbing  
PO Box 95  
Napoleon, OH 43545

**Approval Date:** 2/17/2006

**Phone:** 419-592-0306

#### Owners

**Name:** Mr. Phil Newell  
985 Clairmont Ave  
Napoleon, OH 43545

**Phone:** 419-592-9651

#### Contractors

**Address:** CF Plumbing  
PO Box 95  
Napoleon, OH 43545

**Phone:** 419-592-0306

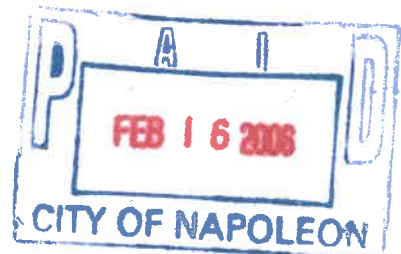
#### Fees and Receipts:

Number	Description	Amount
FEE2006-152	Plumbing inside	\$10.00
<b>Total Fees:</b>		<b>\$10.00</b>
RCPT2006-9		\$10.00

#### Description of work to be done:

**updating inside plumbing**

**SCANNED**



Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 2-16 JOB LOCATION: 985 Clairmont

OWNER: Philip Newell PHONE: 419-592-9651

OWNER ADDRESS: 985 Clairmont CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

CONTRACTOR: C.F. Plumbing & Heating

PHONE #: 419-592-0304 CELL PHONE#: 419-592-0304

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

Is any of the above job going to be subcontracted out? Yes  No:

If yes to whom: \_\_\_\_\_

## DESCRIPTION OF WORK TO BE

PERFORMED: Plumb updated

ESTIMATED COMPLETION DATE: 2-14

## 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"/> STORAGE SHED*           |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW     | <input type="checkbox"/> SWIMMING POOL*          |
| <input type="checkbox"/> FENCE*                     | <input type="checkbox"/> FURNACE REPLACEMENT     |
| <input type="checkbox"/> ADDITIONS*                 | <input type="checkbox"/> TEMP ELECTRIC           |
| <input type="checkbox"/> FURNACE NEW                | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER                 | <input type="checkbox"/> WINDOWS                 |
| <input checked="" type="checkbox"/> PLUMBING        | <input type="checkbox"/> ZONING                  |

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

\*\* IF WORK REQUIRES GOING INTO THE STREET A STREET BOND IS REQUIRED!

FOR PERMIT COSTS PLEASE FILL OUT REVERSE SIDE