

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Plumbing Permit

Permit Number: PL2006-35

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Printed: 5/9/2006

Property Address: 1059 Dodd St.

Applicant

Address: Brad Germanns R & R
9895 Co Rd N
Napoleon, OH 43545

Approval Date: 5/9/2006

Phone: 419-599-1728

Owners

Name: Ms. Margeute Meyer
1059 Dodd St
Napoleon, OH 43545

Contractors

Address: Brad Germanns R & R
9895 Co Rd N
Napoleon, OH 43545

Phone 419-599-1728

Contractors

Address: Elling Plumbing & Heating
T 487 ST HWY 108
Napoleon, OH 43545

Phone 419-598-8991

Fees and Receipts:

Number	Description	Amount
FEE2006-347	Plumbing inside	\$10.00
Total Fees:		\$10.00
RCPT2006-171		\$10.00

Description of work to be done:

NEW BATHROOM

SCANNED



Applicant signature: _____ Date: _____

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: _____ JOB LOCATION: 1059 Dodd St

OWNER: Margente Meyer PHONE: _____

OWNER ADDRESS: 1059 Dodd St CITY: Map ZIP: _____

CONTRACTOR: Brad Dermann

PHONE #: 419-599-1728 CELL PHONE#: _____

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: Elling Plumbing

DESCRIPTION OF WORK TO BE PERFORMED: New bathroom

ESTIMATED COMPLETION DATE: _____

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