

# THE CITY OF NAPOLEON

## BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

**Mechanical Permit**

Page 1 of 1

Permit Number: MC2005-12

Printed: 2/22/2005

**Property Address: 810 Graceway Dr E.**

**Applicant**

Kevins Plumbing & Heating Inc  
Address: 806 Stryker St  
Archbold, OH 43567

**Approval Date:**

**Phone:** 419-475-4715

**Owners**

**Name:** Mr. Bill Tompkins  
**Address:** 810 E Graceway Dr  
Napoleon, OH 43545

**Phone:** 419-599-0355

**Contractors** Kevins Plumbing & Heating Inc  
**Address:** 806 Stryker St  
Archbold, OH 43567

**Phone** 419-475-4715

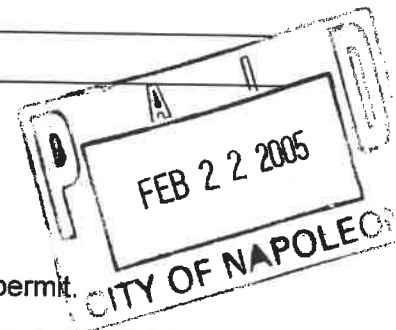
**Fees and Receipts:**

Number	Description	Amount
FEE2005-162	replacing a/c or furnace	\$5.00
FEE2005-163	Penalty (Calc)	\$10.00
<b>Total Fees:</b>		<b>\$15.00</b>

**Description of work to be done:**

5

**Documentation:** Replacing Furnace Fee tripled, penalty for not pulling permit.



**Applicant signature:** AS - mailed in

**Date:** 2/22/05



# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

THIS APPLICATION IS FOR RESIDENTAL CONSTRUCTION INCLUDING BUILDING, ELECTRICAL, PLUMBING, MECHANICAL, DEMILITIONS, REMODELING.

DATE: 2-17-2005 JOB LOCATION: 810 E. Graceway

OWNER: Bill Tompkins PHONE: 419-599-0355

OWNER ADDRESS: 810 E. Graceway CITY: Napoleon ZIP: 43545

CONTRACTOR: Kevin's Plumbing & Heating PHONE: 419-475-4715  
CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES:  NO:

DESCRIPTION OF WORK TO BE PERFORMED: Replace furnace, clean ductwork

ESTIMATED COST OF WORK TO BE PERFORMED: \$ 3500.00

### 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<br>___ # of new circuits | <input type="checkbox"/> SIGN                         |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW<br>___ # of circuits         | <input type="checkbox"/> STORAGE SHED*                |
| <input type="checkbox"/> FENCE*  | <input type="checkbox"/> STREET BOND                  |
| <input type="checkbox"/> ADDITIONS*  | <input type="checkbox"/> SWIMMING POOL*               |
| <input checked="" type="checkbox"/> FURNACE REPLACEMENT                      | <input type="checkbox"/> TEMP ELECTRIC                |
| <input type="checkbox"/> FURNACE NEW   | <input type="checkbox"/> WATER TAP                    |
| <input type="checkbox"/> LAWN METER  | <input type="checkbox"/> WINDOWS:<br>___ # of windows |
| <input type="checkbox"/> PLUMBING  | <input type="checkbox"/> ZONING                       |
| <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.



**THE CITY OF NAPOLEON  
BUILDING & ZONING DEPARTMENT  
255 W. RIVERVIEW  
(419)592-4010**

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**Inspection Record**

**Inspection #:** INSP2005-34

Page: 1

Printed: 2/23/2005

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**Address:** 810 Graceway Dr E.  
Napoleon, OH 43545

**Reference #:** MC2005-12

**Applicant:** Mr. Bill Tompkins

**Directions To Parcel:**

**Inspection Type:** Mechanical Final

**Date:** 2/17/2005

**Inspector:** Tom Zimmerman

**Status:** Complete

**Passed?**

**Required Steps:**

**Comments:** oked furance replacement

**Inspection Checklist:**

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**Corrections:**

**Correction Code:**

**Date:**

**Correction Description:**

**Status:**

**Correction Made Date:**

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**Conditions:**

**Condition Code:**

**Description:**

**Date:**

**Department:**

**Status:**

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**Other Fields:**

