

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Mechanical Permit

Page 1 of 1

Permit Number: MC2005-73

Printed: 9/20/2005

Property Address: 8 Martha Lane

Applicant Elling Plumbing & Heating
Address: T 487 ST HWY 108

Approval Date: 9/20/2005

Napoleon, OH 43545

Phone: 419-598-8991

Owners

Name: Mr. Wayman Steed
Address: 8 Martha Lane

Phone: 419-599-0766

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

Phone 419-598-8991

Fees and Receipts:

Number	Description	Amount
FEE2005-738	replacing a/c or furnace	\$5.00

Total Fees: \$5.00

Description of work to be done: furnace replacement



Applicant signature: _____ **Date:** _____

F-519-8393

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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



OWNER: WAYMAN STEED PHONE: 599-0766

OWNER ADDRESS: 8 MARTHA LANE CITY: NAPOLEON ZIP: 43515

CONTRACTOR: ELLING P+H PHONE: 548-8991

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

DESCRIPTION OF WORK TO BE PERFORMED: FURNACE REPLACEMENT

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 checked="" 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 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.

City of Napoleon

BUILDING & ZONING DEPARTMENT

255 W Riverview

(419)592-4010

F

Inspection Record

Inspection #: INSP2005-328

Page: 1

Printed: 10/12/2005

Address: 8 Martha Lane
Napoleon, OH 43545

Reference #: MC2005-73

Applicant: Mr. Wayman Steed

Directions To Parcel:

Inspection Type: Mechanical Final

Date: 9/23/2005

Inspector: Tom

Status: Complete

Passed?

Required Steps:

Comments:

Inspection Checklist:

Corrections:

Correction Code:

Date:

Correction Description:

Status:

Correction Made Date:

Conditions:

Condition Code:

Description:

Date:

Department:

Status:

Other Fields: