

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Plumbing Permit

Permit Number: PL2007-51

Page 1 of 1

Printed: 12/13/2007

ADDRESS:

1411 Scott St. N.

Applicant

Name: Kevins Plumbing & Heating Inc

Address: 806 Stryker St

Approval Date: 12/13/2007

419-445-4715

Owners

Name: Leupp Building Service Inc.

Address: 400 Freedom Dr

PO Box 602

Napoleon, OH 43545

Phone: 419-599-7737

Contractors

Contractor Type: HVAC

Name: Kevins Plumbing & Heating Inc

Address: 806 Stryker St

Archbold, OH 43502

Phone: 419-445-4715

Fees and Receipts:

| Number | Description | Amount |
|------------------------|----------------------------|----------------|
| FEE2007-764 | Plumbing/outside clean out | \$25.00 |
| Total Fees: | | \$25.00 |
| RCPT2007-567 | | \$25.00 |
| Total Receipts: | | \$25.00 |

SEWER REPAIRS

APPLICANT'S SIGNATURE: _____

DATE: _____

REMINDER: YOU MUST CALL (419)592-4010 FOR AN INSPECTION



CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 12-13-07 JOB LOCATION: 1411 N. SCOTT ST.

OWNER: Leupp Bldg. Service PHONE: _____

OWNER ADDRESS: _____ CITY: _____ ZIP: _____

CONTRACTOR: Kovins Plumbing + Htg.

PHONE #: (419) 445-4715 CELL PHONE#: (419) 572-1509

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:

Digs Sewer. Find Blockage - Repair

ESTIMATED COMPLETION DATE: 12-14-07

PLEASE MARK THE TYPE OF WORK YOU WILL BE PERFORMING

- | | |
|--|---|
| <input type="checkbox"/> A/C ADD ON 1% | <input type="checkbox"/> REMODELING 1% |
| <input type="checkbox"/> BOILER REPLACEMENT 1% | <input type="checkbox"/> ROOFING 1% |
| <input type="checkbox"/> CURBING | <input checked="" type="checkbox"/> SEWER REPAIRS** |
| <input type="checkbox"/> DECKS * 1% | <input type="checkbox"/> SIDEWALK* |
| <input type="checkbox"/> DRIVEWAY* | <input type="checkbox"/> SIDING 1% |
| <input type="checkbox"/> ELECTRICAL SERVICE UPGRADE 1% | <input type="checkbox"/> SHED* (under 200 sq ft) |
| <input type="checkbox"/> ELECTRICAL SERVICE NEW 1% | <input type="checkbox"/> SHED* (over 200 sqft) 1% |
| <input type="checkbox"/> SWIMMING POOL* 1% | <input type="checkbox"/> FENCE* |
| <input type="checkbox"/> FURNACE REPLACEMENT 1% | <input type="checkbox"/> TEMP ELECTRIC 1% |
| <input type="checkbox"/> ADDITIONS* 1% | <input type="checkbox"/> FURNACE NEW 1% |
| <input type="checkbox"/> WATER TAP (size _____") | <input type="checkbox"/> WINDOWS /DOORS 1% |
| <input type="checkbox"/> LAWN METER 1% | |
| <input type="checkbox"/> PLUMBING 1% | |

1%- EFFECTIVE JUNE 1, 2007 BOARD OF BUILDING STANDARDS FEE

*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.

DATE INSTALLED: 12-13-07
INSTALLED BY: KEVIN'S PLUMBING + HTG.
INSPECTED BY: MARTY GOSLAND

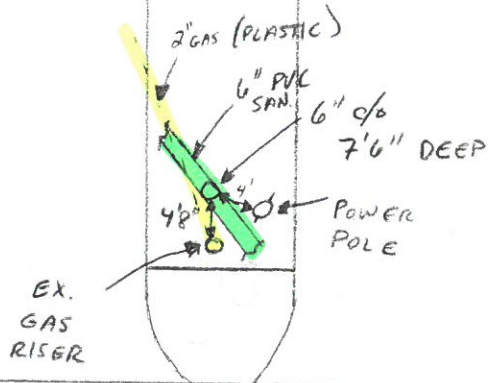
#1411
SCOTT ST.

GRASS MEDIAN

#1413
SCOTT ST.

EX.
ASPHALT
DRIVE

EX. ASPHALT
DRIVE



2" GAS LINE 2' FROM SAN c/o.

DATE INSTALLED: 12-13-07
INSTALLED BY: KEVIN'S PLUMBING & HTG.
INSPECTED BY: MARTY CROSSLAND

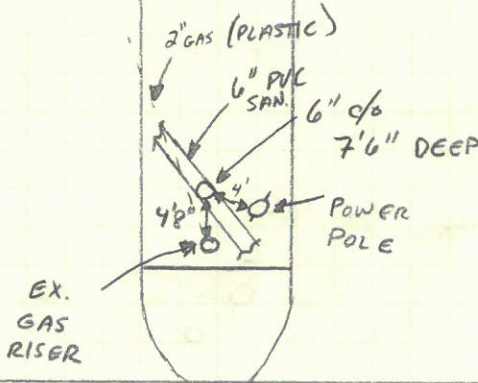
#1411
SCOTT ST.

GRASS MEDIAN

#1413
SCOTT ST.

EX. ASPHALT DRIVE

EX. ASPHALT DRIVE



2" GAS LINE 2' FROM SAN C/O.