THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Mechanical Permit

1 of 1 Page

Permit Number: MC2005-60

Printed:

8/4/2005

Property Address:

1112 Sheffield Ave.

Applicant

Elling Plumbing & Heating

Approval Date: 8/4/2005

Address:

T 487 ST HWY 108

Napoleon, OH 43545

Phone: 419-598-8991

Owners

Name: Mr. Dan Rolander

Phone:

419-592-3580

Address: 15-271 US 6

Contractors Elling Plumbing & Heating

Address: T 487 ST HWY 108

Napoleon, OH 43545

Phone 419-598-8991

Fees and Receipts:

Number

Description

Amount

FEE2005-586

replacing a/c or furnace

\$5.00

FEE2005-587

replacing a/c or furnace

\$5.00

Total Fees:

\$10.00

Description of work to be done:

Replacing furnace & a/c add on

Applicant signature: Carl Eller

CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 8-4-05 JOB LOCATION: 1/12 SHEFFIELD		
OWNER: DAN ROLANDER PHONE: 592-3580 OWNER ADDRESS: 15-271 US 6 CITY: NAPOLEONIP: 43545 CONTRACTOR: ELLING P + H PHONE: 598-8991 CONTRACTOR LICENSED WITH THE CITY OF NAPOLEON?: YES: No: Is any of this job going to be subcontracted out? Yes: No: If yes to whom: DESCRIPTION OF WORK TO BE FURNACE + 400 ON CENTRALAIR PERFORMED: KELLACE FURNACE + 400 ON CENTRALAIR		
PLEASE MARK THE TYPE OF WORK YOU WILL A/C ADD ON _BOILER REPLACEMENT _CURBING _DECKS * _DRIVEWAY* _ELECTRICAL SERVICE UPGRADE _ELECTRICAL SERVICE NEW _FENCE* _ADDITIONS*	BE PERFORMING _REMODELING _ROOFING _SEWER REPAIRS** _SIDEWALK* _SIDING _STORAGE SHED* _SWIMMING POOL* _YEURNACE REPLACEMENT _TEMP ELECTRIC	
HURNACE NEWLAWN METERPLUMBING	WATER TAP (size")WINDOWSZONING	

*PLEASE INCLUDE A PICTURE SHOWING MEASURMENTS 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



Inspection Record		Page: 1
Inspection #: INSF	22005-277	Printed: 9/2/2005
Address: 1112 She		Reference #: MC2005-60
•	n, OH 43545	
Applicant: Mr. Dan I		
Directions To Parce		
Inspection Type:	Mechanial Final	Date: 9/2/2005
Inspector: Tom		Status: Complete
Passed? √		
Required Steps:		
Comments:		
Inspection Checklis	st:	
7		
Corrections:		
Correction Code:		Date:
Correction Descripti	on:	
Status:		Correction Made Date:
Conditions:		
Condition Code:		Description:
Date:	Department:	Status:
Other Fields:		