

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Mechanical Permit

Permit Number: MC2007-45

Page 1 of 1

Printed: 10/25/2007

ADDRESS:

401 Sheffield Ave.

Applicant

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

Approval Date: 10/11/2007
419-598-8991

Owners

Name: Mr. Randy Fahringer
Address: 401 Sheffield Ave
Napoleon, OH 43545

Phone: 419-599-3658

Contractors

Contractor Type: HVAC

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

Napoleon, OH 43545

Phone: 419-598-8991

Fees and Receipts:

Number	Description	Amount
FEE2007-573	replacing a/c or furnace	\$5.00
FEE2007-574	State 1% fee (Calc)	\$0.05
Total Fees:		\$5.05
RCPT2007-446		\$5.05
Total Receipts:		\$5.05

replacing space heater w/ forced air furnace

APPLICANT'S SIGNATURE: _____

DATE: _____

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



CITY OF NAPOLES

**THIS APPLICATION IS FOR
ELECTRICAL, PLUMBING**

Final This when Paid

10-11-07

10-16-07

OWNER: RANDY FAHRING

OWNER ADDRESS: 401 SH

CONTRACTOR: ELLING P

CONTRACTOR LICENSED WITH THE

DESCRIPTION OF WORK TO BE PERFORMED: REPLACE SPACE HEATER WITH FORCED AIR FURNACE

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 checked="" 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.