

THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

Mechanical Permit

Permit Number: MC2007-8

Page 1 of 1

Printed: 1/24/2007

ADDRESS:

443 Welsted St.

Applicant

Name: Kevins Plumbing & Heating Inc
Address: 806 Stryker St

Approval Date: 1/24/2007
419-445-4715

Owners

Name: Mr. Robert Coubernath
Address: 443 Welsted St
Napoleon, OH 43545

Phone: 419-592-0344

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
FEE2007-70	replacing a/c or furnace	\$5.00

Total Fees: \$5.00

RCPT2007-66		\$5.00
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Total Receipts: \$5.00

SCANNED

Replacing furnace

APPLICANTS SIGNATURE: _____

DATE: _____

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



CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 1-24-07 JOB LOCATION: 443 Welsted

OWNER: Robert Guber-nath PHONE: 419-592-0344

OWNER ADDRESS: 443 Welsted CITY: Nap. ZIP: 43545

CONTRACTOR: Kevin's Plg & Hky PHONE: 445-4715

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

DESCRIPTION OF WORK TO BE PERFORMED: _____

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.