

# THE CITY OF NAPOLEON

## BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

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### Plumbing Permit

Permit Number: PL2005-59

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Printed: 10/10/2005

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**Property Address: 1109 Willard St.**

**Applicant** Robert Johnson  
**Address:** Corregedor Rd

**Approval Date:** 10/10/2005

**Phone:** 419-822-5252

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### Owners

**Name:** Mr. Robert Johnson  
**Address:** Corregedor Rd

**Phone:** 419-822-5252

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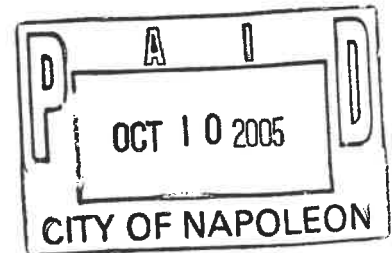
### Contractors

#### Fees and Receipts:

Number	Description	Amount
FEE2005-775	Plumbing inside	\$10.00
<b>Total Fees:</b>		<b>\$10.00</b>

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**Description of work to be done:** Running new plumbing throughout house



**Applicant signature:** Thomas Seabury

**Date:** 10/10/05

# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 10/10/08 JOB LOCATION: 1109 WILLARD ST.

OWNER: ROBERT JOHNSON PHONE: 419-882-5252

OWNER ADDRESS: CORREGIDOR AVE. CITY: SYLVANIA ZIP: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

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

Is any of this job going to be subcontracted out? Yes: \_\_\_\_\_ No: X

If yes to whom: \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: PLUMBING & ELECTRIC - All new - ID  
All new Plumbing -

## 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 checked="" 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 type="checkbox"/> FURNACE NEW                           | <input type="checkbox"/> WATER TAP (size _____") |
| <input type="checkbox"/> LAWN METER                            | <input type="checkbox"/> WINDOWS                 |
| <input checked="" 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.