

# THE CITY OF NAPOLEON

BUILDING & ZONING DEPARTMENT

255 W. RIVERVIEW

(419)592-4010

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## Mechanical Permit

Permit Number: MC2008-7

Page 1 of 1

Printed: 2/22/2008

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### ADDRESS:

**939 Woodlawn Ave.**

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### Applicant

Name: Gable Heating & A/C

Address: 220 Orchard Ln

Approval Date: 2/22/2008

419-599-1176

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### Owners

Name: Ms. Karen Keller

Address: 644 Welstead

Napoleon, OH 43545

Phone: 419-599-8583

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### Contractors

Contractor Type: HVAC

Name: Gable Heating & A/C

Address: 220 Orchard Ln

Napoleon, OH 43545

Phone: 419-599-1176

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### Fees and Receipts:

Number	Description	Amount
FEE2008-125	State 1% fee (Calc)	\$0.05
FEE2008-126	replacing a/c or furnace	\$5.00
<b>Total Fees:</b>		<b>\$5.05</b>
RCPT2008-88		\$5.05
<b>Total Receipts:</b>		<b>\$5.05</b>

APPLICANTS SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

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



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**THE CITY OF NAPOLEON  
BUILDING & ZONING DEPARTMENT  
255 W. RIVERVIEW  
(419)592-4010**



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**Inspections**

Page 1 of 1

**Address:** 939 Woodlawn Ave.  
Napoleon, OH 43545

Printed: 8/1/2008

**Applicant:** Gable Heating & A/C

**Permit Number:** MC2008-7

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**Inspection Date:** 6/3/2008  
**Inspection Number:** INSP2008-110  
**Inspection Type:** Mechanical Rough

**Inspector:** Tom  
**Status:** Approved  
**Passed?**

**Required Steps:**  
**Comments:**

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**Inspection Date:** 8/1/2008  
**Inspection Number:** INSP2008-193  
**Inspection Type:** Mechanical Final

**Inspector:** Tom  
**Status:** Complete  
**Passed?**

**Required Steps:**  
**Comments:**

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**Other Fields:**

# CITY OF NAPOLEON GENERAL PERMIT APPLICATION

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

DATE: 2-22-08 JOB LOCATION: 939 Woodlawn

OWNER: Karan Keller PHONE: \_\_\_\_\_

OWNER ADDRESS: 939 Woodlawn CITY: Nap ZIP: 43845

CONTRACTOR: Bobbe Hagg & Assoc

PHONE #: 419-599-1176 CELL PHONE#: \_\_\_\_\_

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

Is any of the above job going to be subcontracted out? Yes  No:

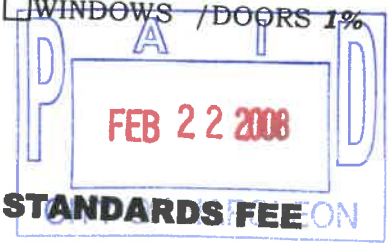
If yes to whom: \_\_\_\_\_

DESCRIPTION OF WORK TO BE PERFORMED: install new furnace

ESTIMATED COMPLETION DATE: 3-15-08

## 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 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 checked="" 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.