

ADDRESS:

TOWNSHIP:



FEE: \$50.00

4800 Ledgewood Drive, Medina, OH 44256

Please call (330) 723-9523 after submittal to pay with any major credit card.

Please email to env@medinahealth.org

All permits VOID 1 year from date of issue

NOTE: 24 Hour Notice required for all inspections

REPLACEMENT HOT WATER TANK ONLY

PLUMBER:

CUSTOMER PHONE:

CUSTOMER:

CUSTOMER EMAIL: