

N^o 11180

**FOLLOWING DATA TO BE ANSWERED BY INSPECTOR
AND SIGNED WHEN RETURNED**

DATE INSPECTED _____ IF SO, HOW AND LOCATION FROM
FIRST MANHOLE DOWN STREAM _____

HOUSE NO. _____ DISTANCE FROM FIRST MANHOLE
DOWN STREAM TO DITCH AT
CURB LINE AND DEPTH _____

SIZE OF PIPE USED _____

WAS LATERAL AT CURB? _____

WAS ATTACHED TO MAIN _____ NAME OF CONTRACTOR _____

SHOW BY DIAGRAM RELATION OF LATERAL TO WALL OF BUILDING SERVED.

SIGNED _____ FILED AT ENGINEER'S OFFICE _____

Inspector for City

REMARKS _____

Nº 11180

OFFICE OF THE DIRECTOR OF PUBLIC SERVICE
PERMIT TO TAP SEWER

MASSILLON, OHIO, 11/13, 2011

RECEIVED OF Backeye

FEE OF \$ 15

FOR WHICH PERMISSION IS GRANTED

REPAIR
TO TAP
CUTOFF

SEWER ON THE WIND

SI

OF Pharmacia

AVE.

ST. TYPE OF STREET Express

THE PREMISES BEING LOT NO. 5456

, HOUSE NO. 1317

WORK TO BE DONE IN ACCORDANCE WITH ORDINANCE NO. 19.1971 DULY PASSED BY THE CITY COUNCIL, AND RULES OF THE
DEPARTMENT OF PUBLIC SERVICE.

NAME OF CONTRACTOR Backeye

**Note: This permit covers work outside of building only. Any work inside
walls of building is subject to Massillon Board of Health regulations.**