

N<sup>o</sup> 11499

**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

SIZE OF PIPE USED \_\_\_\_\_

DOWN STREAM TO DITCH AT

CURB LINE AND DEPTH \_\_\_\_\_

WAS LATERAL AT CURB? \_\_\_\_\_

WAS ATTACHED TO MAIN \_\_\_\_\_

NAME OF CONTRACTOR \_\_\_\_\_

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

*No Record of Inspection*

SIGNED \_\_\_\_\_

Inspector for City

FILED AT ENGINEER'S OFFICE \_\_\_\_\_

REMARKS \_\_\_\_\_

Nº 11499

OFFICE OF THE DIRECTOR OF PUBLIC SERVICE

# PERMIT TO TAP SEWER

MASSILLON, OHIO, 5/7/20

RECEIVED OF

FEE OF \$

16 FOR WHICH PERMISSION IS GRANTED

REPAIR  
TO TAP  
CUTOFF

SEWER ON THE

OF

AVE  
ST TYPE OF STREET

THE PREMISES BEING LOT NO.

HOUSE NO.

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

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