FOLLOWING DATA TO BE ANSWERED BY INSPECTOR AND SIGNED WHEN RETURNED

| DATE INSPECTED 3/27/20 | IF SO HOW AND LOCATION FROMFIRST MANHOLE DOWN STREAM | 231 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------------------|
| House No. 872 | DISTANCE FROM FIRST MANHOLE DOWN STREAM TO DITCH AT | |
| SIZE OF PIPE USED | CURB LINE AND DEPTH | 23- 3' dech |
| Was Lateral at cure? | 4.1N.3" | - Lasa 45,44 Jaga I |
| V. | NAME OF CONTRACTOR | deo carley. |
| Was attached to main | 医克雷氏病 医甲基氏基皮 化多氯化 医二甲二甲二甲二甲二甲二甲甲二甲甲甲基甲甲基甲甲基甲甲基甲甲甲甲甲甲基甲甲基甲甲基 | |
| SHOW BY DIAGRAM RELATION O | F LATERAL TO WALL OF BUILDING S | SERVED |
| 근 사용기를 걸릴 때 하는 것이 하는 것이 없는데 그는 이름이 | | |
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3/4

OFFICE OF THE DIRECTOR OF PUBLIC SERVICE PERMIT TO TAP SEWER

| Colon Table State of Approximation | iotas provinci istalia. Ligipas parestas pares | LLON, OHIO, 3 |
|------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------------------------|
| 11.3 (11.3) | MABBI | FEE OF S |
| RECEIVED OF | HATTAND CAN SHID SHIPS (| and sur to side |
| FOR WHICH PERMISSION IS (| TOASTIND TO BEAM | - Liman granagan kan |
| TO TAP | SEWER, ON T | |
| OF | Sim- | |
| THE PREMISES BEING LOT No |). <u>17 20 %</u> | , House No. |
| Work to be done in ACCO | (1999) કેલા કે પ્રતિકૃતિ જેવેલ પ્રોક્ષેત્ર અને કાર્યો કે મોર્કિક્સ પ્રતિકૃતિ કરો છે. કાર્યો કોર્ક્સ કરો છે કોર્ | 2323, DULY PASSED BY THE CITY COUNCI |

Note. This permit covers work outside of building only. Any work inside of building is subject to Massillon Board of Health Regulations.

NAME OF CONTRACTOR