## Massilon City of Champions

## **CITY OF MASSILLON, OHIO**

151 LINCOLN WAY EAST
MUNICIPAL GOVERNMENT ANNEX
CITY ADMINISTRATION BUILDING
MASSILLON, OHIO 44646
PHONE 330-830-1722 FAX 330-830-1786

| PERMIT DATE: |           |  |  |  |  |  |
|--------------|-----------|--|--|--|--|--|
|              | 1/21/2014 |  |  |  |  |  |
| PERMIT NO.   |           |  |  |  |  |  |
|              | 4300      |  |  |  |  |  |

PERMIT TO TAP SANITARY SEWER

| This permit is issued subje<br>of start of work (330) 830-1 | ct to the latest Codified Ord<br>722. All permits issued unde | inances of the City of<br>er this ordinance are  | Massillon, OH. The    | ne City E              | ngineer to be notified 24                               | hours in               | advance                       |
|---|---|--|-----------------------|------------------------|---|------------------------|-------------------------------|
| RECEIVED OF:  |   | PE   | RMIT TYPE             | Cut                    | Off   |                        |                               |
| CONTRACTOR INFORMATION                                      |   | SI   | TE INFORMA            | ATION                  |   |                        |                               |
| CONTRACTOR:   | COTTRILL WRECK  | KING OV  | WNER'S NAM            | ΛE:                    |   |                        |                               |
| CONTACT:  |   | FU   | ILL STREET            |                        | 1223 JOHNSON  | CT CI                  |                               |
| ADDRESS:  |   | AND CONTRACTOR OF THE CONTRACT | DRESS:                |                        |   | 010                    | =                             |
| CITY:   |   |  | TY LOT NUM            |                        | 8196-97   |                        |                               |
| STATE:  |   | PU   | IRPOSE OF             | CUT:                   | DEMOLITION  |                        |                               |
| ZIP:  |   | ZC   | NING CLAS             | S:                     |   |                        |                               |
| PHONE:  | (330) 832-3820  | ST   | REET SIDE:            |                        | West  |                        |                               |
| FAX:  |   |  |                       |                        |   |                        |                               |
| SURETY:   |   | PH   | ONE OTHER             | ₹:                     |   | r                      |                               |
| SANITARY SEW  | ER CONNECTION   | JN: insi   | de walls of the build | ers work<br>ding is su | outside of the building ON bject to the Massillon Board | LY. Any v<br>d of Heal | work<br>Ith                   |
| USE: Residentia   | 1   | Doz  | SKETCH:               | DRA                    | WING #:   |                        | #4300                         |
| DATE INSPECTED  | 4/2/2014  |  |                       |                        | ,   |                        |                               |
| located on the WEST side of                                 |   |  | 1223 Johnson ST SE    |                        |   |                        |                               |
| JOHNSON ST SE   |   | between  |                       |                        |   |                        |                               |
| 3RD ST SE   |   | and  |                       |                        |   |                        | 10'4-                         |
| SHRIVER AVE SE  |   |  |                       |                        | cut-off 10' behind c                                    | urb line               | 7 10'dp                       |
| Direction from do   | wnstream Manhole  | : NORTH  | _                     | 10                     | 3" from D/S MH  |                        |                               |
| Distance from dov   | wnstream Manhole  | : 103  | 0                     |                        | Johnson ST SE   |                        |                               |
| Connection Lengt  | h:  | (FEET)   |                       |                        |   |                        |                               |
| Connection Depth  | : 10  | (FEET)   |                       |                        |   |                        |                               |
| Size of Sewer Pipe: 6 (INC                                  |   |  | HES)                  |                        |   |                        |                               |
| Pipe Material: CLAY   |   |  | INSPECTION REQUEST:   |                        |   |                        |                               |
| INSPECTORS NA   | ME: JEFF KING   |  | SANITAR               | Y SEV                  | VER PERMIT FEE  | Ĭ:                     | \$15.00                       |
| COMMENTS:   | SEE OLD PERMIT #6103  |  |                       |                        | CAPACITY FEE  | E:                     | \$0.00                        |
|   |   |  |                       |                        | TOTAL COST  | : [                    | \$15.00                       |
| TWO WORKIN  | IG DAYS BEFORE YOU  | LDIG   |                       |                        |   | ,                      | man a transfer subtract 1990. |

TWO WORKING DAYS BEFORE YOU DIG Ohio Utilities Protection Service Call 1-800-362-2764 Toll Free.... Non-Members must be called directly.

AUTHORIZED BY: DIRECTOR OF PUBLIC SAFETY AND SERVICE

ISSUED BY: Linda Mikutel