| 3317442 313817 70 20<br><b>N</b> ?2712               | FOLLOWING DATA TO BE ANSWERED BY INSPE<br>AND SIGNED WHEN RETURNED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ector j   |
|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|
| Date Inspected 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | If so how and location from first manhole down stream  Distance from first manhole                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |           |
| Size of pipe used 2000  Was lateral at curb?         | down stream to ditch at curb line and depth  Name of Contractor  Name of Contractor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |           |
| Was attached to main                                 | eral to wall of building served.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |           |
| ie iki.<br>sed by the Cip Council, and Rules Mi      | the promises being H. H. House the promises being in accordance with dimense No. 2323, daly pa                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |           |
| Signed A. F. B.M                                     | Spot Super State of the State o | SEP 2 8.1 |
| Remarks Lateral C                                    | anne ched to tateral at eurl 16 H fr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | am stra   |

## OFFICE OF THE DIRECTOR OF PUBLIC SERVICE

Nº 2712 PERMIT TO TAP SEWER

|                                                                                                                                                                                                                                   | mod nederal bas wod     |                         | 1. Descreed of                                                               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|------------------------------------------------------------------------------|
| andra an<br>The second andra andr | Lincers wwob elocinate  | Massillon, O.,          | any 29 19                                                                    |
| Received of                                                                                                                                                                                                                       | Maria with mari wall    | to com                  | fee_ of 8_2                                                                  |
| for which permission is                                                                                                                                                                                                           | granted                 | -18 4 E 4 18 1          | 이 경기가 가지 않는데 그 이 없다는 가게 되는 것이 되었다. 그 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 사람들은 |
| to tap                                                                                                                                                                                                                            | Aage of                 | sewer, on the           | 10065 0 500 mg do 15                                                         |
|                                                                                                                                                                                                                                   | 1 A.Z.                  |                         | mondo margare es escars                                                      |
| the premises being Lot.                                                                                                                                                                                                           | No. 4/294               | St. House No.           |                                                                              |
| Work to be done in acc                                                                                                                                                                                                            | cordance with Ordinance | No. 2323, duly passed l | by the City Council, and Ru                                                  |
| the Department of Publ                                                                                                                                                                                                            | lic Service.            |                         | 경험하고 있는 그리고 하고 있었다.<br>19일 전 : 12 전 : 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 : 1 :    |
| Name of Contractor                                                                                                                                                                                                                | Ko., B. Tin             |                         |                                                                              |

NOTE. This permit covers work outside of building only. Any work inside walls of buils subject to Massillon Board of Health Regulations.