

Call 1-800-362-2764 Toll Free....

Non-Members must be called directly.

## 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

PERMI'	T DATE:
	11/2/2010
PERMI	T NO.

4090

PERMIT TO TAP SANITARY SEWER

This permit is issued subject to the latest Codified Ordinances of the City of Massillon, OH. The City Engineer to be notified 24 hours in advance of start of work (330) 830-1722. All permits issued under this ordinance are void after 120 days from date of issuance.

RECEIVED OF:			PERMIT TYPE New		
CONTRACTOR INFORMATION		SITE INFORMATION			
CONTRACTOR:	GRABILL PLUMBI	NG	OWNER'S NAME:	PEBBLE CHASE BUILDERS	
CONTACT:			FULL STREET	1307 PEBBLE CHASE CIR NE	
ADDRESS:			ADDRESS:		
CITY:			CITY LOT NUMBER		
STATE:			PURPOSE OF CUT:	SANITARY	
ZIP:			ZONING CLASS:		
PHONE:	(330) 756-2075		STREET SIDE:	South	
FAX:					
SURETY:			PHONE OTHER:	(330) 284-4650	
SANITARY SEV	VER CONNECTION	ON:	NOTE: This permit covers work walls of the building is subject to	outside of the building ONLY. Any work inside to the Massillon Board of Health Regulations.	
USE: Residentia	al		SKETCH: DRA	AWING #:	
DATE INSPECTE	11/20/2010				
located on the	side	of			
		between		• /	
		and	1/	101d Primit #4135	
			_	010	
Direction from do	wnstream Manhole	e:		2 -1 #	
Distance from do	wnstream Manhole	:	Sec	HIMI 4135	
Connection Lengt	th:	(FEET)		•	
Connection Depth	n:	(FEET)			
Size of Sewer Pip	e:	(IN	CHES)	BEOLIEGE	
Pipe Material:			INSPECTION	REQUEST:	
INSPECTORS NA	ME:		SANITARY SE	WER PERMIT FEE: \$100.00	
COMMENTS:		1.1111111111111111111111111111111111111	and an experimental color	CAPACITY FEE: \$500.00	
				TOTAL COST: \$600.00	
	NG DAYS BEFORE YOU lities Protection Service	J DIG	AUTHORIZED BY: [	DIRECTOR OF PUBLIC SAFETY AND SERVICE	

ISSUED BY:

Linda Mikutel



Ohio Utilities Protection Service Call 1-800-362-2764 Toll Free....

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CONTRACTOR INFORMATION		SITE INFORMATION					
CONTRACTOR:	GRABILL PLUMB	ING	OWNER'S NAM	ME:	PEBBLE CHA	SE BUI	LDERS
CONTACT:			FULL STREET	•	1309 PEBBLE	CHACI	E CID NE
ADDRESS:			ADDRESS:			: CHASI	E CIR NE
CITY:			CITY LOT NUM				
STATE:			PURPOSE OF	CUT:	SANITARY		
ZIP:			ZONING CLAS	S:			
PHONE:	(330) 756-2075		STREET SIDE:		South		
FAX:							
SURETY:			PHONE OTHER	R:			
SANITARY SEV	VER CONNECT	ION:	NOTE: This permit cov walls of the building is				
USE: Residenti	al		SKETCH:	DRA	WING #:		
DATE INSPECTE	D						
located on the	side	e of					
		between				"	
		and			Void		
		9					77
Direction from do	ownstream Manho	le:		60	er Dam	1/7	4113
Distance from do	wnstream Manho	le:		2	//		1. 3
Connection Leng	th:	(FEET)					
Connection Dept	h:	(FEET)					
Size of Sewer Pip	oe:	(IN	CHES)	TION	REQUEST:		-
Pipe Material:							
INSPECTORS NA	ME:		SANITAR	Y SEV	WER PERMIT I	FEE:	\$100.00
COMMENTS:					CAPACITY I	FEE:	\$500.00
					TOTAL CO	ST:	\$600.00
TWO WORKI	NG DAYS BEFORE YO	DU DIG	AUTHORIZE	ED BY: D	DIRECTOR OF PUBLIC	C SAFETY /	AND SERVICE

ISSUED BY:

Linda Mikutel