

APPLICATION FOR PERMIT TO TAP SEWER

(Print or Type)

Owner Lewis Johnston NO. _____
Address 7 Lakeview Dr. BLDG. PERMIT _____
Contractor C.F. Berken & Sons, Inc. PERMIT FEE \$ _____
Address Napoleon Tel. 592-3961 DATE PAID _____
for office use only

LOCATION OF CONNECTION

Street and No. 7 Lakeview Dr. Sanitary _____ Storm _____
Lot No. 10 Subdivision Bauman Size of Tap 6"
Size and Type of Sewer 4" PVC ALL WORK MUST BE INSPECTED

I certify that the sewer will be used only as indicated and no other Drainage will be connected.

Date 6-24-80 Signature [Signature] owner-builder-agent
do not write below this line

INSPECTION RECORD

Date Inspected 6-24-80 Size and Type of Sewer 4" PVC
Location see sketch Depth 3' Type of Test _____
Inspected and Approved By: [Signature] Date 6-24-80
Additional Information Cleanout inside house inspector _____ Date _____

Send copy to: _____

SKETCH OF INSTALLATION

