SEWER CONNECTION

No. 404   Napoleon, Ohio Date_____19____

Received of____*Otto Meyer*_____

_____ Dollars

Being for capping permit to supply sewer_____

Addition_____

Street No.____915   W. MAIN_____

Sewer Size_____Inch   Cost_*No CHARGE*

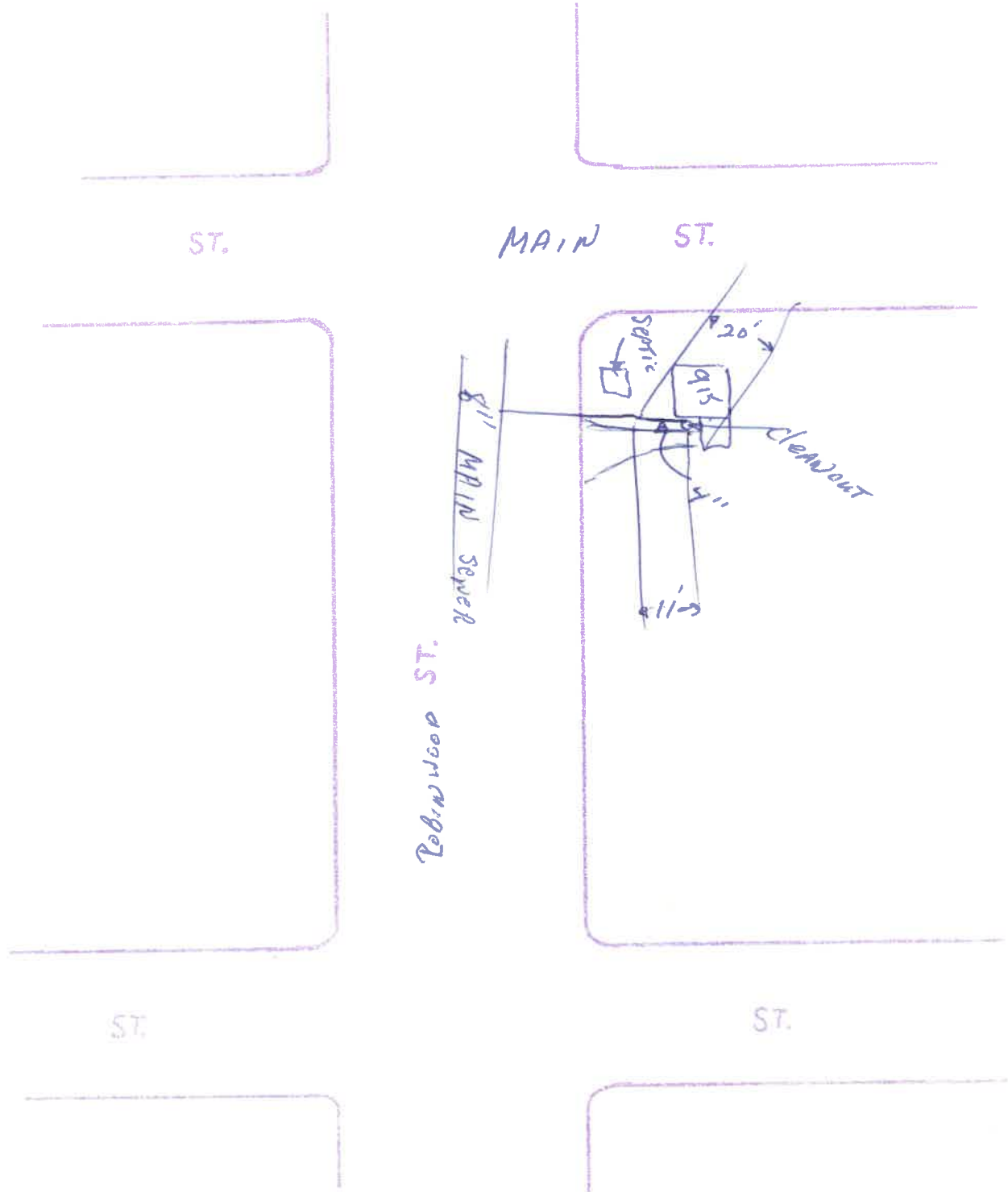Size and Kind of Main Sewer_____

Location of Main Sewer_____

Depth of Main Sewer_____

Name OTTO MEYER   Size of Tap   4"   Date SEPT 11, 71
Street 915 W. MAIN   Size and Kind of Sewer   4" VCP
Old No.   Location of Sewer 11' FROM CLEANOUT 20' FROM GARAGE CUR
New No.   Depth of Sewer(4") 3½' DEEP
Crossover   6" (5½' DEEP)   Distance to Curb Stop

Remarks 4" SEWER 3½' DEEP HAS AN ELBOW AND A 4' VCP WITH ANOTHER
ELBOW WITH A REDUCER CONNECTING TO THE 6" CROSSER. THE CROSSOVER
IS 5½ FEET DEEP & 4' VCP IS LAID ON A 30° ↓ DOWN FROM 4" SEWER

APPLICATION FOR PERMIT TO TAP SEWER

No. _404_   Date _September 10_, 19_71_

Name _Otto Meyer_

Address _915 W. Main   Napoleon, Ohio_

LOCATION OF CONNECTION

Street and Number _Same_

Lot No._____   Addition_____

Date work will start_____(All work must be inspected)

Work will be done by_____

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

                            Applicant_____

Date _9-10-71_   Address_____

Permit Fee _No charge_   _Rupert W. Schweinhagen_
                                Certification by City Clerk

For inspection call 592-5387

Work inspected_____

Work completed_____

Remarks_____
_____
_____
_____
_____
_____

APPLICATION FOR PERMIT TO TAP SEWER

No. _404_   Date _September 10_, 19_71_

Name _____ Otto Meyer _____

Address _____ 915 W. Main   Napoleon, Ohio _____

LOCATION OF CONNECTION

Street and Number _____ Same _____

Lot No. _____   Addition _____

Date work will start _____(All work must be inspected)

Work will be done by_____

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

Applicant_____

Date _____ 9-10-71 _____   Address _____

Permit Fee _No charge_   _Rupert W Schweinhagen_
                                Certification by City Clerk

For inspection call 592-5387

Work inspected_____

Work completed_____

Remarks_____