

APPLICATION FOR PERMIT TO TAP SEWER

No. 606 Date 6-22 19 73

Name Don Westhoven Home

Address 135 W. Washington

LOCATION OF CONNECTION

Street and Number 831 Maple.

Lot No. 19 Addition Phillip & Staffords.

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 _____ Address _____

Permit Fee 60.00
August W. Schweinhagen
Certification by City Clerk

Work Inspected _____

Work Completed _____

Remarks _____

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