

APPLICATION FOR PERMIT TO TAP SEWER

Owner IDA SCHEELE
ADDRESS 512 OHIO STREET
CONTRACTOR _____
ADDRESS _____ TEL. _____

NO. _____
BLDG. PERMIT _____
PERMIT FEE \$ _____
STREET BOND _____
DATE PAID _____
For office use only

LOCATION OF CONNECTION

Street and No. 512 OHIO Sanitary _____ Storm X
Lot No. 82 Subdivision MARY DODD'S 2ND Size of Tap _____
Size and Type of Sewer _____ ALL WORK MUST BE INSPECTED
Street to be opened-Yes _____ No _____ Opening bond fee set by Engineer \$ _____
Street opening agreement approval date _____

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

Date _____ Signature _____
Owner-Builder-Agent

DO NOT WRITE BELOW THIS LINE

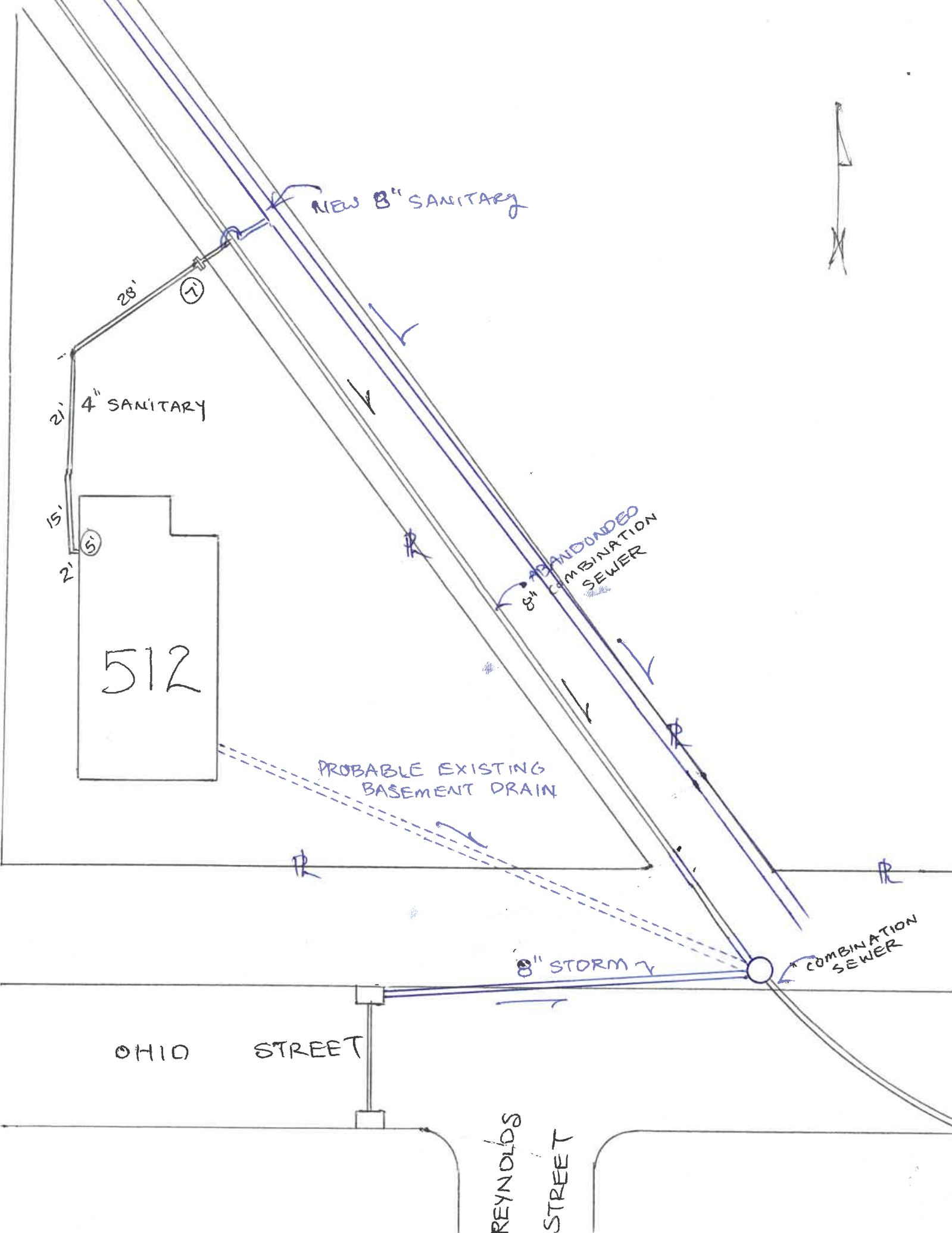
INSPECTION RECORD

Date Inspected FEB 84 Size and Type of Sewer _____
Location _____ Depth _____ Type of Test _____
Inspected and Approved by: GARY BOTTICHER Date _____
Inspector

Additional information _____

Send copy to: _____

SKETCH OF INSTALLATION -ON BACK



NEW 8" SANITARY



28'

(7)

2' 4" SANITARY

15'

(5)

2'

512

ABANDONED
8" COMBINATION
SEWER

PROBABLE EXISTING
BASEMENT DRAIN

8" STORM

COMBINATION
SEWER

OHIO STREET

REYNOLDS
STREET