

APPLICATION FOR PERMIT TO TAP SEWER

Owner John Small
ADDRESS 1630 Riverview, Napoleon, O
CONTRACTOR Kahl Builders & Supply Co
ADDRESS RR 4 Defiance, O TEL. 782-7756

NO. _____
BLDG. PERMIT _____
PERMIT FEE \$ _____
STREET BOND _____
DATE PAID _____

For office use only

LOCATION OF CONNECTION

Street and No. 1630 Riverview Sanitary _____ Storm X
Lot No. _____ Subdivision Anthony Wayne Size of Tap _____
Size and Type of Sewer DS ALL WORK MUST BE INSPECTED
Street to be opened-Yes _____ No X 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 9-2-88 Signature Richard D. Kahl
Owner-Builder-Agent

DO NOT WRITE BELOW THIS LINE

INSPECTION RECORD

Date Inspected _____ Size and Type of Sewer _____
Location _____ Depth _____ Type of Test _____
Inspected and Approved by: _____
Inspector _____ Date _____

Additional information _____

Send copy to: _____

SKETCH OF INSTALLATION - ON BACK

Orchard Home

□ Existing catch basin

4" A.D.S. downspout drain

