

SEWER PERMIT

Lake County Administration Bldg.

105 Main Street

P.O. Box 490

Painesville, Ohio 44077-0490

Permit No. PM-10338

Parcel No. 04A043000024

LAKE COUNTY DEPARTMENT OF UTILITIES

Phone (440) 350-2652

S. D. Perry Madison

New Conn.

Repair

Cut & Cap

Reconnect

Date 05/14/2013

PERMISSION is hereby granted to GOSOL LLC 4304 Maple St. Perry, OH 44081

(Property Owner Name & Address)

4304 Maple St

Sublot #

Bldg. #

Subdivision

and to STAR EXCAVATING, INC.

(Property Address)

5818 NORTH RIDGE RD. MADISON, OH 44057

to make connections

to the main sanitary sewer.

Type ~~Residential~~ Commercial

(type: res, condo, duplex, apt., comm.)

Road Opening

5
3127

Drawing No.

Plumbing

Raster

Tap-in Fees

Gallons

Madison Plant

\$16,461.23 4,877.00

\$0.00 Receipt No. 23471

2 km
11-1313

Billing

\$0.00 0.00

\$0.00 Inspection Fee \$0.00

AK

Computer

\$0.00 0.00

\$0.00 Other Fees \$0.00

Taxmap

\$0.00 0.00

\$0.00

Mylar

\$0.00 0.00

\$0.00

Permit Amount: \$16,461.23

Note:

JOB # 13-14

All work under this permit is to be done under the supervision of, and to the satisfaction of the County Sanitary Engineer and in conformity with the rules and regulations of this office. **SEWER WORK BY UNLICENSED BUILDERS WILL NOT BE ACCEPTED BY THE INSPECTOR.**

You are designated as LICENSED SEWER BUILDER on the permit and you may process with the work under the terms of your license. **WE ARE NOT RESPONSIBLE FOR THE ACCURACY OF THE LOCATION OF THE Y-BRANCH INFORMATION CONTAINED HEREIN.**

Instruction Approved by

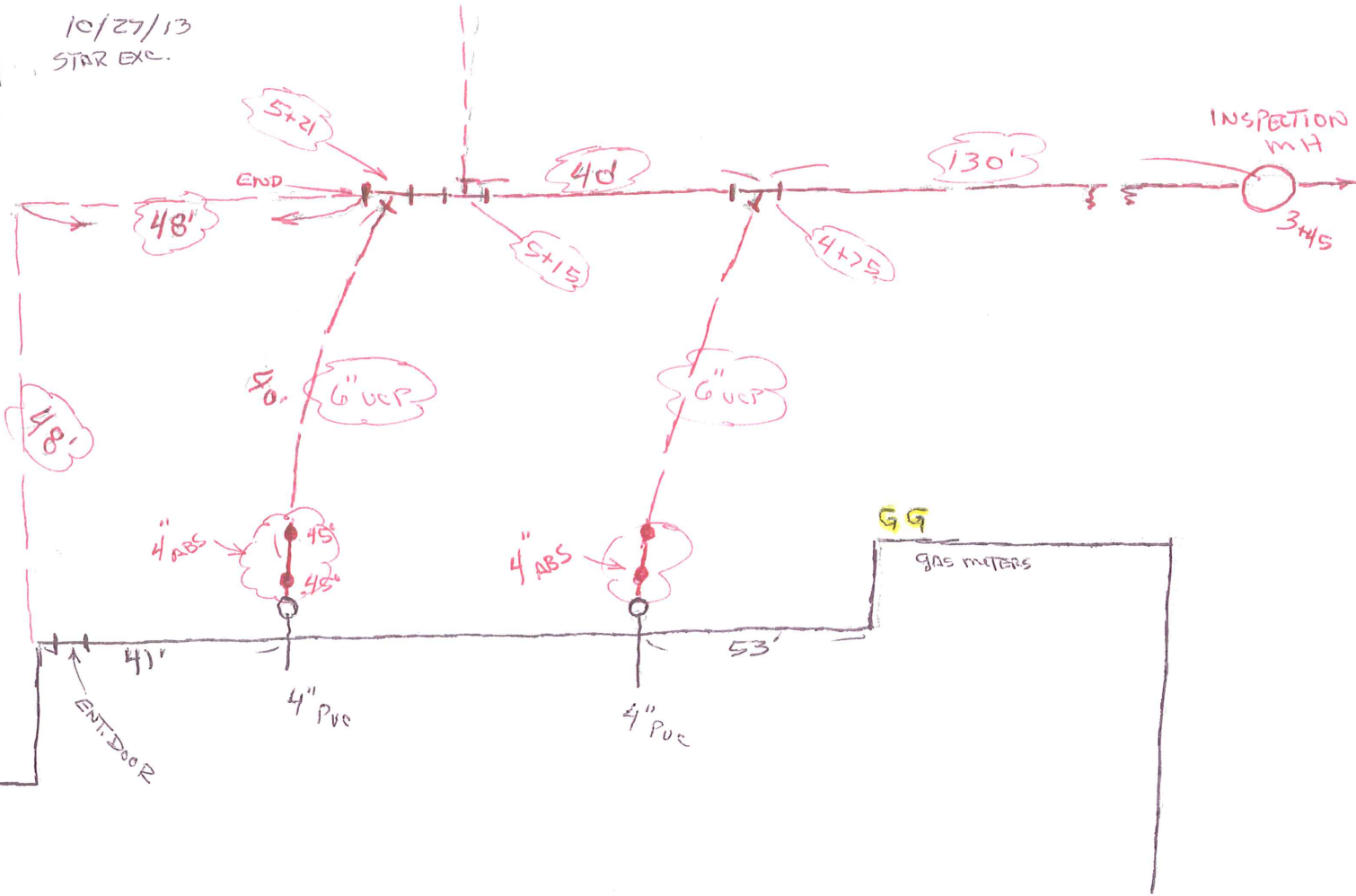
SKIP K. G. B. M.

(Inspector)

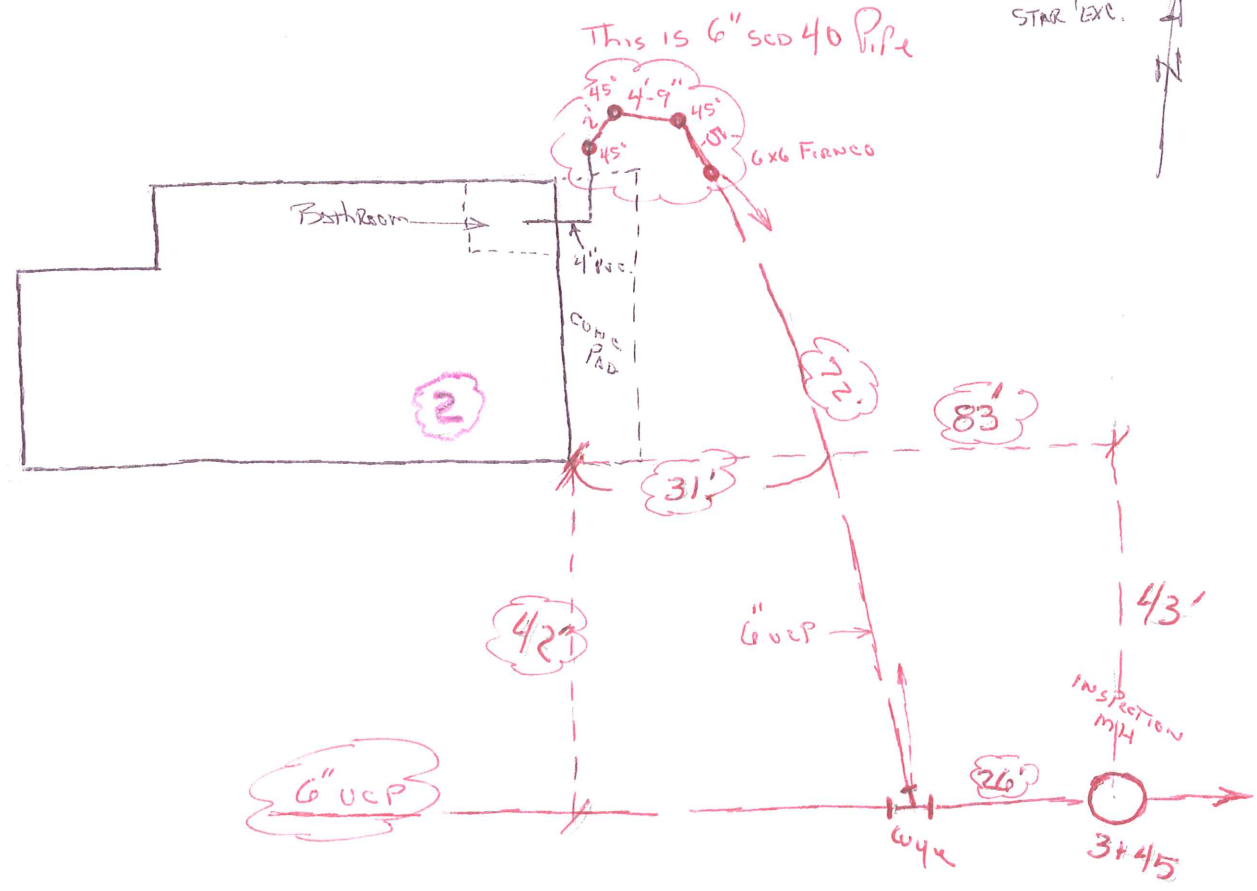
Date: 10-20-2013

By

10/27/13
STAR EXC.



10/27/13
STAR EXC.



Inspector-Time of Arrival: _____

Permit No. PM-10338

Inspector-Time of Departure: _____

Inspector-Hours on Job 1.4

Lateral or Wye pipe manufacturer found:

Licensed Sewer Bldr-Hrs on job: _____

6" DIP

Name: _____

Job Title: _____

STAR EXC.

Type of soil conditions: Wet / clay cinders Does soil conditions have ground water? yes
If yes, what is the vertical distance above or below maximum elevation of pipe 3' feet.

City water connected with meter _____

No. of Apts/Units/Trailers _____

Linear feet of pipe _____

Size of pipe 6"

Type UCP

Mfg. LOGAN

Exfiltration Test

Head above top of pipe at maximum elevation _____ feet.

ALL TESTED + PASSED

Allowable loss _____ gallons.

Actual loss _____ gallons.

Length of test _____ hours.

Length of pipe tested _____ feet.

Dimensioned plan

In detail with Wye or lateral distance as found, detailed references to all bends and fittings.

Number of connections to building See attached drawings for each BLDG.

Inspector S. R. Gibben

Connection/repair date 10-27-13

Billing Department
Residential/Commercial Billing Information

Permit No. PM-10338 Owner: GOSEL LLC

Number of Units: 3 Type of connection/repair: NEW RESIDENTIAL

Meter reading: 3/4¹¹ Like Co. WATER. Owner billed: _____

type of meter: John Tompson FROM Tenant billed: _____

EAST END TOOK Reading
Name of individual tenants and addresses:

4304 Maple ST. - Perry

John's Auto Service (BLOG # 2)

ELECTRIC COMPANY (BLOG # 4)

PPC (BLOG # 1 & # 3)

