

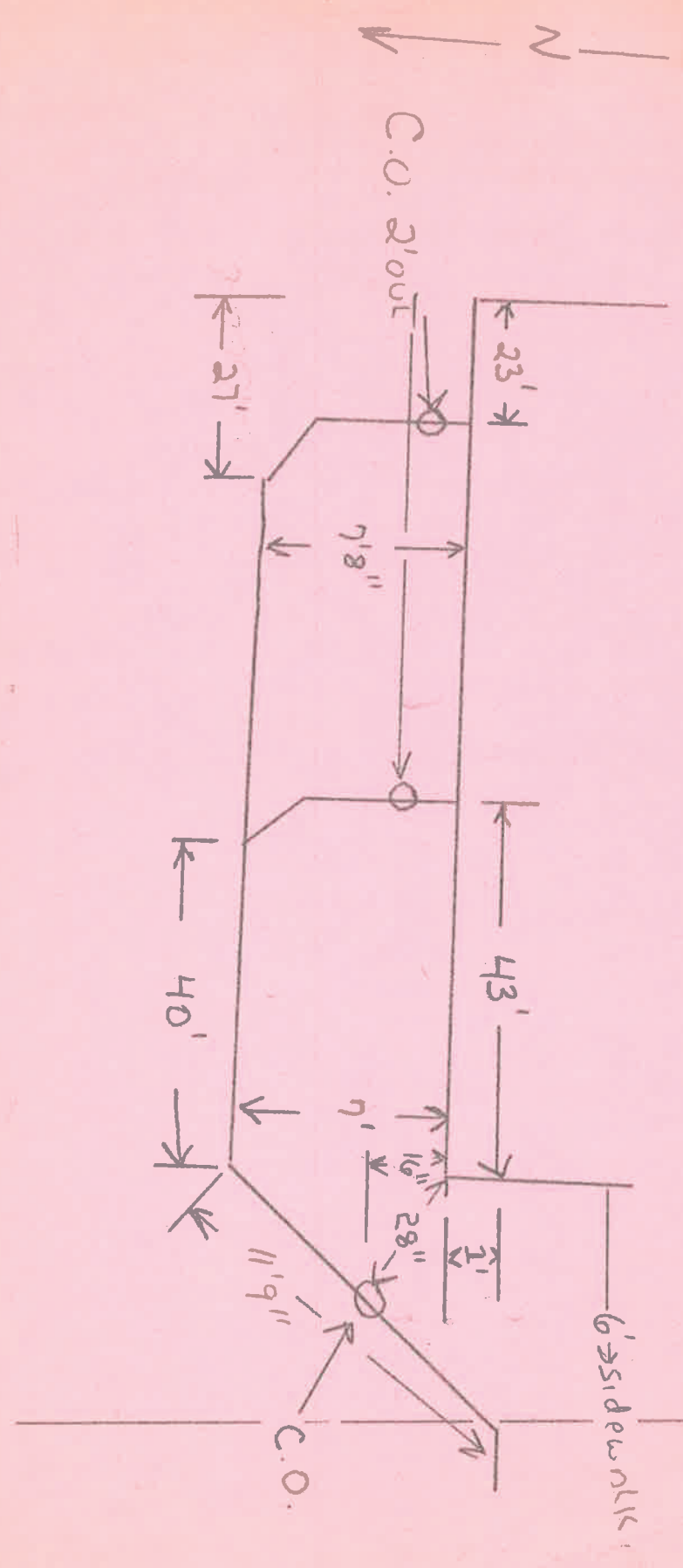
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CITY OF ARLINGTON
SEWER DEPARTMENT

SIDE SEWER PLAT MAP

PERMIT # 249

Owner's Name Brown Matson Side Sewer Contractor _____
 Owner's Mailing Address 9114 State St. - NSVL Mailing Address _____
 Address of Property 509 West Ave.
 Legal Description KM Prop. TAX Acct. # 6181-001-009-0007



1. Commercial Single Residence Multiple Dwelling Joint Use _____
2. Distance from M.H. No. _____
3. Depth: Sewer Main _____ Basement _____
4. Depth of pipe at House connection (First Floor) _____
5. Inspected by Steve Sargent Date 12-20-89
- Type of pipe 6" PVC Pipe Size _____