CITY OF GALLIPOLIS P.O. BOX 339 333 THIRD AVENUE GALLIPOLIS, OHIO 45631 740-441-6022

STREET CUT PERMIT

Owner/Company					
Street Address					
Daytime Phone #			All and the second seco		
Address of Proposed Worl	(4 1/4	2000	46-12	
Purpose of Opening:					
Turpose or opening.					
		1400	100		
General Contractor					
T.					
Fees: Base Fee			62	5.00	_
Base ree	If City cor	nes back to		5.00	cost of Time and
	T-1		ministrative co	2	
I hereby swear or affirm that my knowledge, truthful and a all liability.		107			
APPLICANTS SIGNATUI	RE				
				78.07	
CODE OFFICER SIGNAT	URE				

STREET SUPT. SIGNATURE					
CITY MANAGER SIGNATURE					
DATE PAID		RECE	EIPT#		PERMIT #