Name I W. Stephens **Service No.**

Address 25 Circle Road

Lot 234-237 Sta.8+0 L **Location**

Kind of Pipe **Size** **Size of Main**

Repair—Renewal—New Service Lucente #949 **Location**

Date		Material	Amount		Total		Date			Amount	
11-2-67	32'	6" Transite pipe									
	10'	4" Cast Iron pipe									

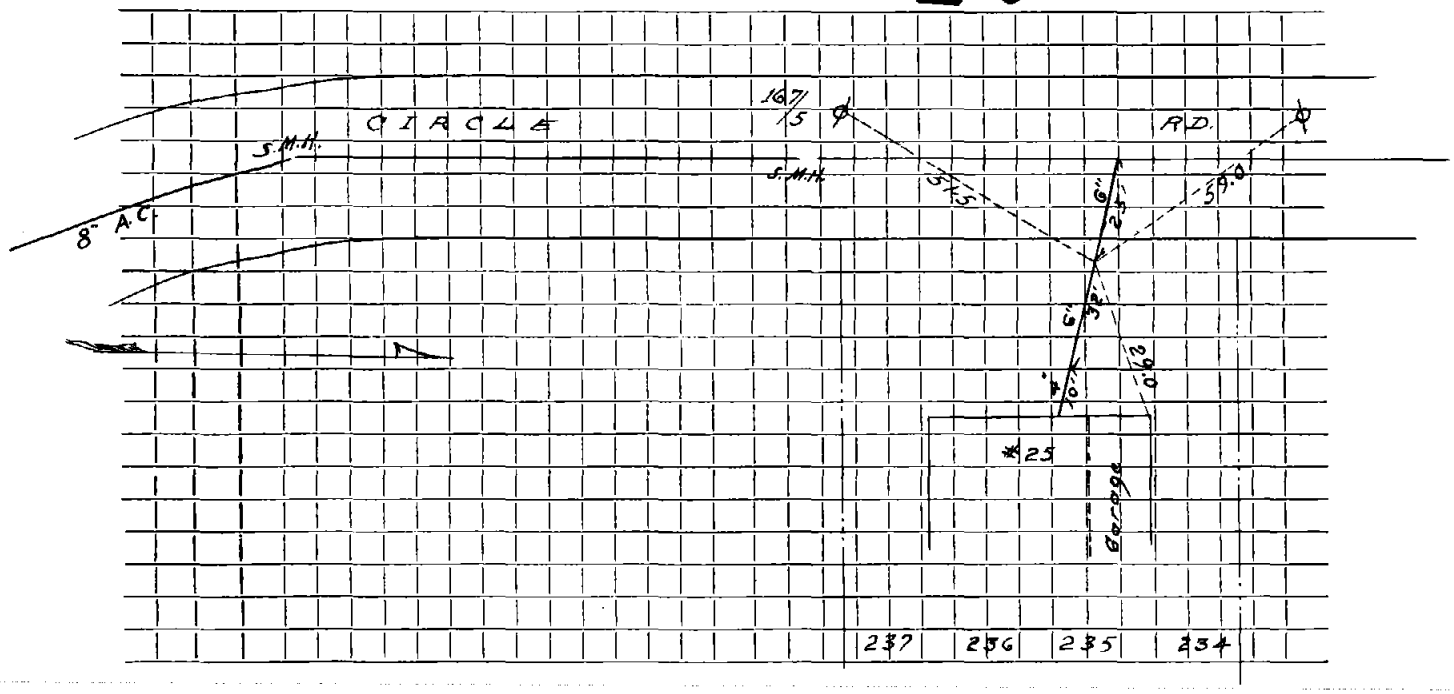
H.B.M.18501

DATE _____

TOWN OF LEXINGTON — BOARD OF PUBLIC WORKS

SEWER DIVISION

Sketch of Service Here 25



Connection made in ..... Street. Work completed .....

Remarks: .....

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