H.B.M.16010

WATER SERVICE RECORD

Name *Scott Properties* **Service No.**

Address *17 Circle Road*

Location

Repair—Renewal—New Service

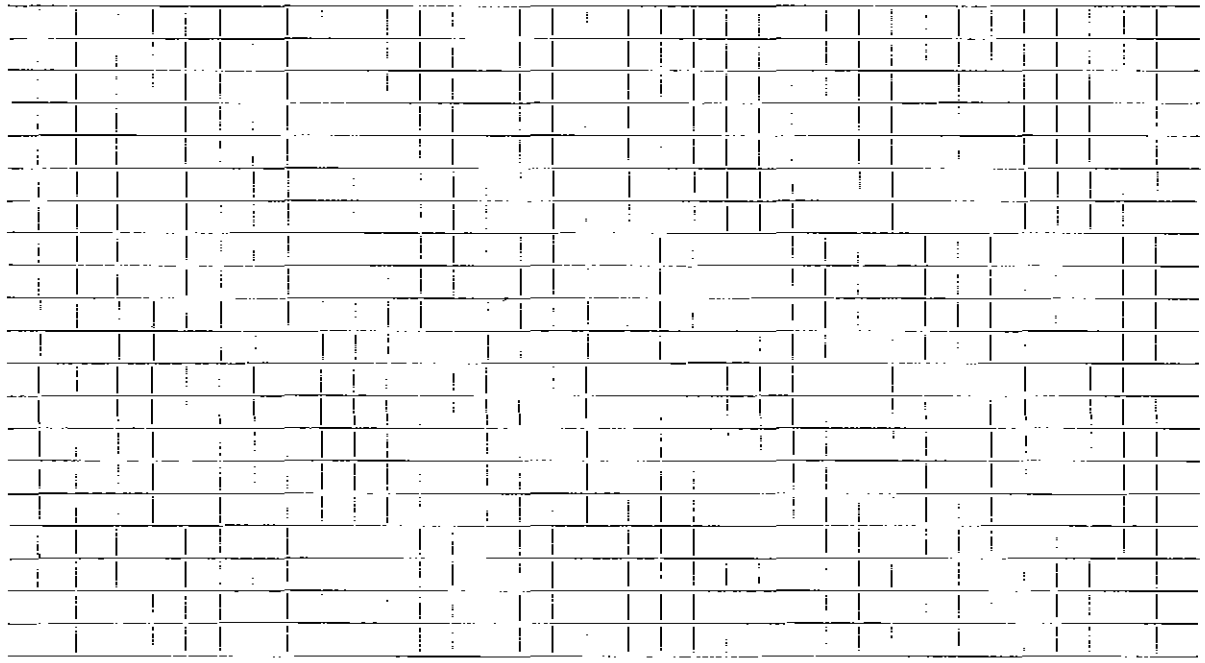
Date	Material	Amount	Total	Date	Amount
1975	*INSTALLED BY CONTRACTOR*				

DATE_____

TOWN OF LEXINGTON — BOARD OF PUBLIC WORKS

WATER DIVISION

Sketch of Service Here



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

Remarks: .....

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