WATER SERVICE RECORD

Name **Service No.**

Address

Location 19 Revere ST.

Repair—Renewal—New Service

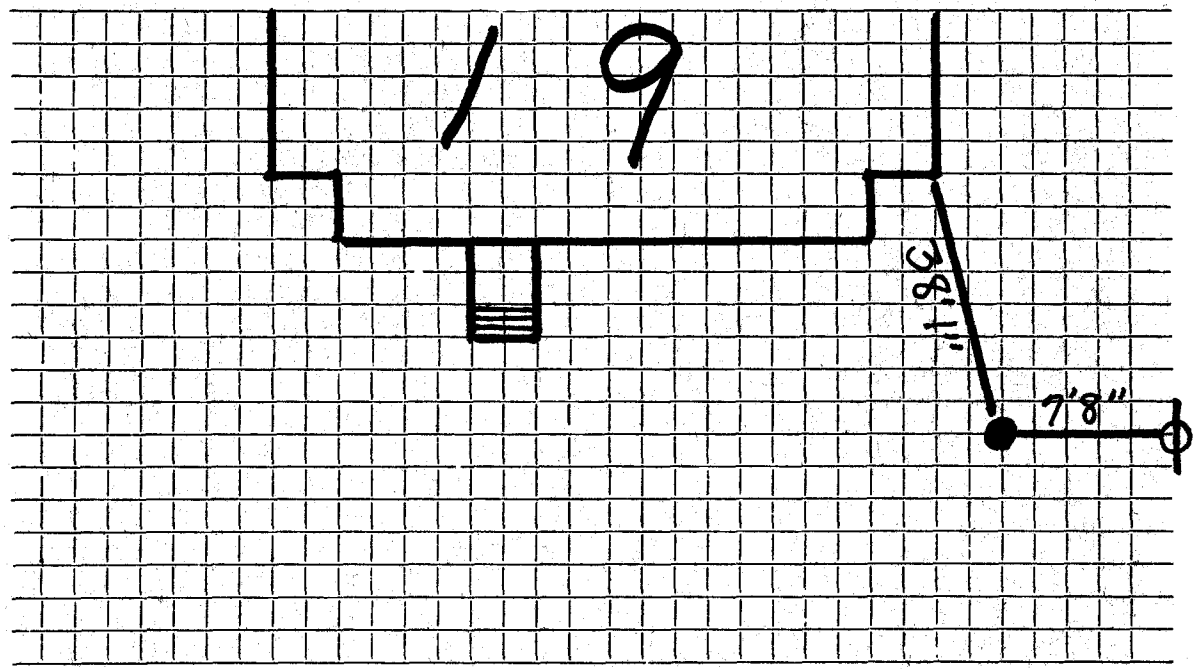
Date		Material	Amount		Total		Date			Amount	

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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