

SERVICE CALL

□□□□□□

Department of Public Utilities

Date 1-17-90-02

Name Spiller CODE \_\_\_\_\_

Address 819 Partridge St

Phone No. 545-8644 Call Rec'd 1050

☒ A.M. ☐ P.M.

Account No. \_\_\_\_\_ Meter No. \_\_\_\_\_

☐ Meter Leak

☐ Sewer Stoppage

☐ No Water

☐ Sewer Overflowing

☐ Low Pressure

☒ Hole in Yard/Street

☐ Box Cover Missing

☐ See Customer

Remarks from sewer line repair

Dispatched To Base 3 Time 1058

By Dunn

Date \_\_\_\_\_ Time \_\_\_\_\_ Repaired \_\_\_\_\_

Trouble Found: \_\_\_\_\_

☐ Water

☐ Service Lateral

☐ Stoppage

☐ Sewer

☐ Main Line

☐ Leak

☐ Other

☐ Meter

☐ Cave-In

Remarks Or Referred To \_\_\_\_\_

Signature \_\_\_\_\_

Code: A - Customer, B - Other Department,  
C - PM Program, D - Other

CG-16,066 R/83