CITY OF LAWRENCE
CERTIFICATE OF SUFFICIENCY OF PLAN
SANITARY SEWERS

Project: _____

Location: _____

Permit Number: _____ Plan Date: _____

I hereby certify that to the best of my knowledge and belief:

1. The sanitary sewer plan for this project is in compliance with the requirements as set forth in Title 5, Article 1, Chapter 6, of the City of Lawrence Municipal Code and the standard specifications for sanitary sewer construction.

2. The calculations, designs, reproducible drawings, masters and original ideas reproduced in this sanitary sewer plan are under my dominion and control and they were prepared by me and my employees.

_____ Date: _____
Signature

_____
Printed

_____
Address City State Zip

Indiana Reg. No.: _____

SEAL