

DONEGAL COUNTY COUNCIL

GROUP SEWERAGE SCHEME

SURVEY SHEET

Reference No. _____

Name of Scheme _____ Group Sewerage Scheme

Name of Organiser _____

Address of Organiser _____

Point of Connection to Main Sewer:- _____
(Sketch map to be attached)

<i>No.</i>	<i>Name of Participant</i>	<i>Address</i>
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<i>No.</i>	<i>Name of Participant</i>	<i>Address</i>
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<i>No.</i>	<i>Name of Participant</i>	<i>Address</i>
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