

RESOLUTION OF THE CITY COUNCIL

No. 680

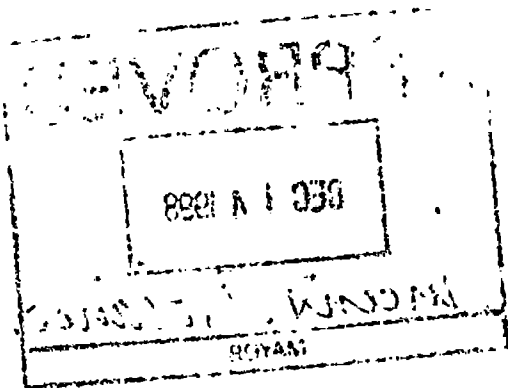
Approved December 14, 1998

RESOLVED, That the Director of Public Works is requested to
cause the sewers located along Petteys Avenue to be baited for Rodents.

IN CITY COUNCIL
DEC 3 1998
READ AND PASSED
Evelyn V. Fargnoli
PRES.
Michael X. Clement
CLERK

APPROVED
DEC 14 1998
Vincent A. Cianci
MAYOR

Carrollman 19/03/36, By Request



CITY OF PROVIDENCE
CITY COUNCIL
Request for Citizen Assistance
421-7740 X 297 or 521-7477

No. 2500

Requested By: Councilmember: Iglizzi Date: 11/19/98
Ward: 7 Staff Member: Storia

Request: _____

Referred To: City Department: _____ Person: _____
Division: _____ Response Due Date: _____

Department Response: _____

Will be Completed On: _____ Referred to Dept. of: _____
Signature: _____

Notes: Resolution: Bait Letters Ave

Constituent Information

Name: _____ Phone: _____
Address: _____

Please return copy to the office of: Administrative Assistant to City Council,
Room 310, City Hall within three (3) days of receipt.

CITY OF PROVIDENCE
CITY COUNCIL
Request for Citizen Assistance
421-7740 X 297 or 521-7477

Nº 2500

Requested By: Councilmember: Igloria Date: 11/19/98
Ward: 7 Staff Member: Storia

Request: _____

Referred To: City Department: _____ Person: _____
Division: _____ Response Due Date: _____
Department Response: _____

Will be Completed On: _____ Referred to Dept. of: _____
Signature: _____

Notes: Resolution: Bait Petters Ave
Under X-11-11-11

Constituent Information

Name: _____ Phone: _____
Address: _____

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Room 310, City Hall within three (3) days of receipt.

CITY OF PROVIDENCE
CITY COUNCIL
Request for Citizen Assistance
421-7740 X297 or 521-7477

Nº 2500

Requested By: Councilmember: glenn Date: 11/19/98
Ward: 7 Staff Member: Louis

Request: _____

Referred To: City Department: _____ Person: _____
Division: _____ Response Due Date: _____
Department Response: _____

Will be Completed On: _____ Referred to Dept. of: _____
Signature: _____

Notes: Requester: Bait Pottery Ave

Constituent Information

Name: _____ Phone: _____
Address: _____

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