

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

	2-0002100.00
4 APPLICATION FOR SEW	ER PERMIT Nº 000562
Permit No Date	11-12-85
Permit Void 90 days from Date of Issuanc	e
Owner Name J. C. Da	xdy p
Property Address 101 West	+ bury - Jalcoshurst
Lot # P.0.	Box
Town Flexfleton, IN	zip Code 46067
Phone 778-4523 Wate	r Meter"
\$ /50 00 Tap on Fee Paid	
s 2500 Inspection fee paid	Ê
Application is hereby made for conn Waste District Sewer System for the abov Residential, Commercial, Ind Institutional User Information	e listed property - Permit Type: Mustrial, or Governmental/
All workmanship and materials shall conform to the standards of the District Ordinance as described in Ordinance 84-2 and 84-3 as amended. Acceptance and approval must be made by the District inspector or his duly authorized representative before backfilling and final connection is made to the main sewer lines. Any violation of applicable regulations will cause all lines and appurtenances in violation to be removed and replaced at the owners expense.	
The Fall Creek Regional Waste District is responsible for the inspection, approval of materials, and installation techniques only. All costs for materials and installation and any liabilities resulting from same is the sole responsibility of the property owner. I have read and fully understand the above provisions and agree to comply by said provisions. MMS, J. C. Bandy APPLICANT(S) SIGNATURE	

INSPECTO	R Ram
Date inspected 6 20-86 Approved	
Reason for rejection	
Date reinspected Ar	pproved Rejected
	A A A A A A A A A A A A A A A A A A A
Notes: Size Pipe 6 "	*
Type Pipe P.V.C.	North
Basement Yes No	
Sump Pump Yes No	
Downspout to Ground Yes VNo	
Septic Tank Pumped & filled Yesk No	
Contractor Carl Davis	1-1
Special Conditions	6"C.O 2 1000
	0
FT DOWNSPOUTS TO STREET, BACK - " TO FINID TILE SUMP Rump TO FINID THE	
Pad /	