

## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

	1-0000827.00
APPLICATION FOR SEWER PER	Nº 000614
	11/11/18
Permit No. Date  Permit Void 90 days from Date of Issuance	141705
Owner Name	
Property Address 102 U. MANIA	TRAILER
Lot # P.O. Box	1 /
Town Leafells , IN 2 ip C	ode 46048
Phone Water Mete	
\$ Tap on Fee Paid	
5 Or 00 Inspection fee paid	
Application is hereby made for connection Waste District Sewer System for the above list Residential Commercial Industria Institutional User Information	ed property - Permit Type:
All workmanship and materials shall confo District Ordinance as described in Ordinance 8 Acceptance and approval must be made by the Di authorized representative before backfilling a to the main sewer lines. Any violation of app cause all lines and appurtenances in violation at the owners expense.	4-2 and 84-3 as amended. strict inspector or his duly nd final connection is made licable regulations will
The Fall Creek Regional Waste District is approval of materials, and installation technimaterials and installation and any liabilities sole responsibility of the property owner.  I have read and fully understand the above comply by said provisions.  APPLICANT(S) SIGNATURE	ques only. All costs for resulting from same is the resulting and agree to
************	********
INSPECTOR	
Date inspected 4-22 Approved	Rejected
Reason for rejection	
Date reinspected Approved	Rejected
Notes:	
Size Pipe PUC	North
Basement Yes No	
Sump Pump Yes No X	
Downspout to Ground Yesk No	WATER-I
Septic Tank Pumped & filled Mes No	VATENT
Contractor Surves Belles	PC.O.
Special Conditions	BERUTY
	- Leave-