TOMORROW TODAY !

FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO E Pendleton, IN 46064-0059 PO Box 59 778-7544

add order

26-05480,00

Nº 2917 APPLICATION FOR SEWER PERMIT Date 11-3-00 Permit Void 90 days from Date of Issuance Owner Name (hristopher) Coleman Property Address 10622 S 8R 13 P.O. Box Town Jorticle , IN Zip Code 46064 City Water Well Phone ___ __ Tap on Fee Paid Inspection fee paid Application is hereby made for connection to the Fall Creek Regional Waste District Sewer System for the above listed property - Permit Type:
Residential Commercial Industrial or Governmental/ Institutional _____. User Information _____ 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. APPLICANT(S) SIGNATURE INSPECTOR Tun Date inspected 11-3-2000 Approved Rejected Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe 6 Type Pipe SDR 35 Basement Yes No / Sump Pump Yes No -ひくこん Downspout to Ground Yes No Septic Tank Pumped & filled Yes No Contractor SEIF. Special Conditions

Existing Home____

New Construction