R / FALL CREEK REGIONAL WASTE DISTRICT A 23494.06 TOMORROW F D Box 44, Pendleton, Indiana 46064 TODAY ! 3-1023562.01 Nº 001031 APPLICATION FOR SEWER PERMIT 2-21-85 Date Permit No. Permit Void 90 days from Date of Issuance RIDER Owner Name Sinto extial Way Property Address R3 Bar P.O. Box Lot # endector ____, IN Zip Code ______46064 Town 78-4980 Phone Water Meter No 15000 Tap on Fee Paid Stilldue ? 25.00 8-10-89 Inspection ree 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) APPDICANT(S) SIGNATURE ************************** INSPECTOR B Approved V Rejected Date inspected Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe _ North Type Pipe 110 Basement Yes No A Sump Pump Yes NoX Downspout to Ground Yes X No Septic Tank Pumped & filled Yes No LU Contractor DAN Fes/ER Special Conditions