add order on file R/w FALL CREEK REGIONAL WASTE DISTRICT EAN 9378 S. 650 West PO Box 59 OMORROW D 46064-0059 778-7544 26-05390.00 Pendleton, IN Contractor - Sweeze Nº 2947 APPLICATION FOR SEWER PERMIT Date _11-17-00 Permit Void 90 days from Date of Issuance Owner Name MARY W. DRAGER Property Address 10740 SOUTH LEE STREET Lot #____ P.O. Box TOWN FORTVILLE, IN Zip Code 46040 Phone 317-485-6884 City Water Well -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. Mary W. Drager PPLICANT (S) SGNATURE ******* INSPECTOR BAD Date inspected 1-18-1 Approved V Rejected Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe 6 Type Pipe ____ SDR 26 North Basement Yes No ¥ Sump Pump Yes No X Downspout to Ground Yes No X Fisher Deu Septic Tank Pumped & filled Yes X No Contractor SWEEZ Special Conditions Ante Existing Home New Construction HOME HAS GRINDER pump UNDER HOWSE FOR LOWER Rev. 11/84 BAth Oisly