



FALL CREEK REGIONAL WASTE DISTRICT

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

add order
on file

22-15629.00

APPLICATION FOR SEWER PERMIT

Nº 2369

Date 5/3/96

Permit Void 90 days from Date of Issuance

Owner Name Mustin Builders Michael Romack

Property Address 110 W Estate Dr.

Lot # 63 P.O. Box _____

Town Anderson, IN Zip Code _____

Phone _____ City Water _____ Well ☒

\$ 400 Tap on Fee Paid

\$ 2156 ^{Capacity}
~~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 _____

Date inspected _____ Approved _____ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe _____"

Type Pipe _____

Basement Yes _____ No _____

Sump Pump Yes _____ No _____

Downspout to Ground Yes _____ No _____

Septic Tank Pumped & filled Yes _____ No _____

Contractor _____

Special Conditions _____

Existing Home _____

New Construction _____



see attached



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APPLICANT(S) SIGNATURE

INSPECTOR B

Date inspected 5-3-96 Approved ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe 6 "

Type Pipe PVC

Basement Yes _____ No ☒

Sump Pump Yes ☒ No _____

Downspout to Ground Yes ☒ No _____

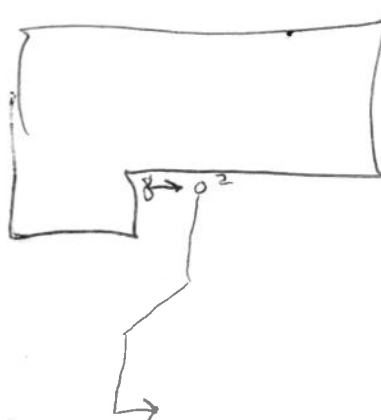
Septic Tank Pumped & filled Yes _____ No ☒

Contractor Bud Bolton

Special Conditions _____

Existing Home _____

New Construction ☒



MUSTIN BUILDERS, INC.

DATE	INVOICE NO.	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE
5-3-96 V 144	Fall Creek Regional Waste Dist. J 1408-108 J 1411-108	Tap Fees			
CHECK DATE	5-3-96	CHECK NUMBER	27420	TOTALS	\$5,112.00
					\$5,112.00

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS



MUSTIN BUILDERS, INC.

810 CENTRAL AVENUE
ANDERSON, IN 46012
PH. 317-644-8502

SOCIETY NATIONAL BANK
ANDERSON, IN 46015
6-704-412

27420

PAY: Five Thousand One Hundred Twelve and 00/100 Dollars

DATE	CHECK NO.	AMOUNT
5-3-96	27420	\$5,112.00

PAY
TO THE
ORDER
OF
Fall Creek Regional Waste Dist.

⑈027420⑈ ⑆041207040⑆00700⑈ 15984⑈