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FALL CREEK REGIONAL WASTE DISTRICT

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

13-32069.99

APPLICATION FOR SEWER PERMIT

Nº 2450

Date 4/25/97

Permit Void 90 days from Date of Issuance

Owner Name Crescent HomesProperty Address 120 Blue SpruceLot # 3 P.O. Box _____Town Pendleton, IN Zip Code 46064Phone _____ City Water ☒ Well ☐\$ 400 Tap on Fee Paid\$ 1900 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.

[Signature]
APPLICANT(S) SIGNATURE

INSPECTOR TimDate inspected 4-28-97 Approved ☒ Rejected ☐

Reason for rejection _____

Date reinspected _____ Approved ☐ Rejected ☐Notes:
Size Pipe 6"Type Pipe SOR 35Basement Yes ☐ No ☒Sump Pump Yes ☐ No ☒Downspout to Ground Yes ☐ No ☐Septic Tank Pumped & filled Yes ☐ No ☐Contractor ATKINS EXCAVATING

Special Conditions _____

Existing Home ☐New Construction ☒