FALL CREEK REGIONAL WASTE DISTRICT

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CLEAN

TODAY !

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Box 44, Pendleton, Indiana 46064

1-0002575,00

APPLICATIO	N FOR SEWER PERMIT	Nº 000043
Permit No.	Date 70	and a start of the
Permit Void 90 days from Date of	f Issuance	
Owner Name Surpet a	Quer	
Property Address _ 122 X	Houston	
Lot #	P.O. Box P.O Boy	345
Town Irealls	, IN Zip Code 460	18
Phone 485-5830	Water Meter _ Organ	lls "
\$ 150.00 Tap on Fee	Paid	
s 2500 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 _____.

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.

arnet a. Owen APPLICANT (S) SIGNATURE ******** INSPECTOR 61 Date inspected 10-16-85 Approved Rejected Reason for rejection Date reinspected Approved Rejected Notes: 3 Size Pipe North PVC Type Pipe ____ Basement Yes NO No Sump Pump Yes Downspout to Ground Yes X No Septic Tank Pumped & filled Yes NoXContractor BILL PASSMURE Special Conditions INSIDE PLUMBING TO BE ROURS 00 SOON

FALL CREEK REGIONAL WASH DISTRICT

Box 44 Pendiaton, Indiana 44 466

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122 S Huston ST

Repair

Tim McCurdy 09/2023