## Lateral Preplacement

## Fall Creek Regional Waste District 9378 S 650 W, P.O. Box 59, Pendleton, IN 46064 765-778-7544

## Agreement for Sanitary Sewer Service

	ment of capacity in and connection to, the	regarding the e District's
Now therefore, the parties, in consideration of receipt and sufficiency of which is hereby acknown	f the mutual promises set out in this Agre ledged, agree as follows:	ement, the
<ol> <li>The Applicant agrees that all workmanshi and the District's construction standards. before backfilling and final connection is provision will cause all lines and appurter Applicant's expense.</li> <li>The District shall have the right to enter u</li> </ol>	District must accept and approve all work made to the sewer mains. Any violation o ances in violation to be removed and repl	and materials of this aced at the
inspect, repair, or replace any equipment that has an impact on said service.	sed in connection with the District's serv	rice or which
<ol> <li>The Applicant shall be responsible for all failure to pay any rate charge or fee may retermination of service to the property, the</li> </ol>	esult in a lien against the property and/or cost of which will be borne by Applicant.	the
<ul> <li>but not limited to, all attorney's fees and of the District shall not be responsible for an unless said damages are due to default, ne</li> <li>If there is an available sanitary sewer with property owner shall be required to connect.</li> <li>The Applicant and District agree that the property and the terms of this heirs, executors, administrators, personal adesignees, and transferees.</li> </ul>	y damages as a result of any failure to surplect or culpability on the part of the District in three hundred (300) feet of the property to the District's sanitary sewer system. It is to the District's sanitary sewer service toucher Agreement bind the District and Application	rict. y line, the s and ant and their
The parties hereto have read and fully underst provisions.	and the above provisions and agree to con-	nply with said
FALL CREEK REGIONAL WASTE DISTRICT	APPLICANT	
Signature	Signature	
STATE OF INDIANA ) ) SS: COUNTY OF MADISON )		
SUBSCRIBED and sworn to before me this _	day of, 20	
My Commission Expires:	Signature	
	Printed	
	Notary Public Resident of Cou	unty
*************	*************	****
Inspector Date Inspected 1.13.17 Reason for Rejecton	Approved Rejected	
Reason for Rejecton	Approved Rejected	
Notes.		
Size Pipe Type Pipe Basement <u>Yes No</u>		
Sump Pump Yes No		North
Downspout to Ground Yes No		
Septic Tank Pumped & Filled Yes No	_ \.	
Contractor Brackney	See atta	ched
Special Conditions Existing Home	Α.	
New Construction	See attai	ins



PROJECT	SHEET	OF	

SUBJECT\_\_\_\_\_

TI-61-1 STAD

JOB NO SRF

By Brackney

140 N. EAST-S.	+	
8'		
294: From MH# 100	12" PVC	EASTST