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ALL CREEK REGIONAL WASTE DISTRICT

3:00

Box 44, Pendleton, Indiana 46064

APPLICATION FOR SEWER PERMIT	Nº 000725
Permit No Date MOV. 21,	1985
Permit Void 90 days from Date of Issuance	
Owner Name Bettie C. Smith	
Property Address 147 C. 77th. At.	1. A. A. A.
Lot # P.O. Box	
Town anderson, IN zip code 460	13
Phone 644-0375 Water Meter	"
\$ 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.

APPLICANT (S) ************************************			
Reason for rejection	A	_ Rejected	
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 Porter Brokey Special Conditions	5		North