



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

10-23783.00

3-1023783.00

APPLICATION FOR SEWER PERMIT

Nº 001003

Permit No. _____ Date 12-5-84

Permit Void 90 days from Date of Issuance

Owner Name John Cason

154 E Central Way

Property Address E. Central - 2nd Ave from Water - East side

Lot # _____ P.O. Box R3 Box 137

Town Pendleton, IN Zip Code 46064

Phone 778-4284 Water Meter 5/8

\$ 150.00 Tap on Fee Paid

\$ 25.00 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.

John Cason

APPLICANT(S) SIGNATURE

INSPECTOR [Signature]

Date inspected 12-6-84 Approved _____ Rejected X

Reason for rejection FLAT Slope Bottom C.O. & 90° Bends

Date reinspected 12-6-84 Approved X Rejected _____

Notes:

Size Pipe 6 "

Type Pipe PVC

Basement Yes _____ No X

Sump Pump Yes _____ No X

Downspout to Ground Yes _____ No X

Septic Tank Pumped & filled Yes _____ No X

Contractor Larry Cox

Special Conditions _____

