



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-0015600

Nº 000761

APPLICATION FOR SEWER PERMIT

Permit No. _____ Date Nov. 22, 1985
Permit Void 90 days from Date of Issuance
Owner Name Margorie Whitinger
Property Address 15 E. Cotate
Lot # _____ P.O. Box _____
Town Anderson, IN Zip Code 46013
Phone 643-6090 Water Meter _____"
\$ 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.

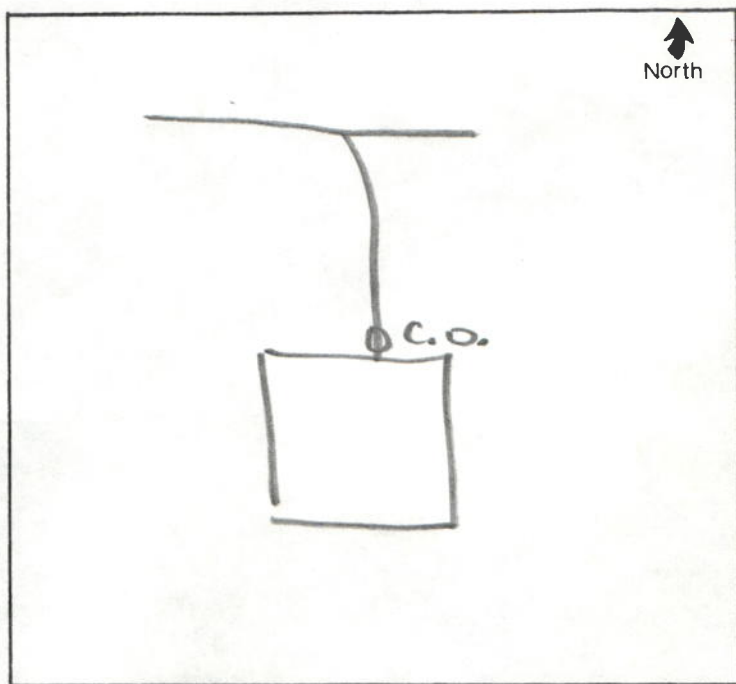
I have read and fully understand the above provisions and agree to comply by said provisions.

Margorie T. Whitinger
APPLICANT(S) SIGNATURE

INSPECTOR [Signature]
Date inspected 1-24 Approved _____ Rejected _____
Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:
Size Pipe 6"
Type Pipe PVC
Basement Yes _____ No ☒
Sump Pump Yes _____ No ☒
Downspout to Ground Yes ☒ No _____
Septic Tank Pumped & filled Yes ☒ No _____
Contractor PASSMORE
Special Conditions _____





No. 000761

Application for Disposal

Project No. Nov. 22, 1982
 Name Yampa Valley
 Address 1500
 City Hatch
 State UT
 Zip 84033
 Phone 800-240-0000
 Fax 800-240-0000

Application is hereby made for permission to use the Fall Creek Regional Waste District's facilities for the disposal of the following waste materials:

All waste materials and materials which will be used in the construction of the waste management facility, including but not limited to, concrete, steel, and other materials, and all other materials which are not listed in the above categories, shall be disposed of in the waste management facility.

The all waste management facility shall be located on the land owned by the applicant, and the applicant shall be responsible for the construction and operation of the waste management facility.

I have signed this document and the waste management facility shall be used for the disposal of waste materials.

Signature of Applicant

 Title of Applicant

 Date of Application

 Date of Disposal

 Name of Disposal Facility

 Address of Disposal Facility

 City of Disposal Facility

 State of Disposal Facility

 Zip of Disposal Facility

 Name of Disposal Facility

 Address of Disposal Facility

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