add order on file R/w FALL CREEK REGIONAL WASTE DISTRICT OMORROW Box 44, Pendleton, Indiana 46064 D 22-28485.00 Nº 001993 APPLICATION FOR SEWER PERMIT 1-26-94 Date Permit No. Permit Void 90 days from Date of Issuance Owner Name Donald E. Wallen Property Address 1615 W. Huntsville Rd _____ P.O. Box _____251 Lot # TOWN PENDleton , IN Zip Code 46064 Phone 778-2200 Water Meter s 700.00 Tap on Fee Paid 2,000 Availabily Fee 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.

Alma, Wallens APPLICANT(S) SIGNATURE ***** INSPECTOR DON Approved _____ Rejected _____ Date inspected [[[[] Reason for rejection 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 Nov Contractor Special Conditions NO Clam ON 108 was Done and Bockfiller without inspection AS for AS from Pit TO HOUSE AND ALL ELECTRICAL. Honorille Ro MAN

PAIL CREEK REGIONAL WASTE DISTRIC

