#8559

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

Agreement for Sanitary Sewer Service

This Agreement made and entered into this 1 Regional Waste District ("District") and Arbor Hoprovision of sanitary sewer service, and the assign	mes	("Applicant") regarding the
facilities for the premises located atCold Spring	s @ Huntzinge	
Street Address: 1672 CREEK BE	D LN.	
Now therefore, the parties, in consideration or receipt and sufficiency of which is hereby acknown		
 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. The District shall have the right to enter u inspect, repair, or replace any equipment that an impact on said service. The Applicant shall be responsible for all failure to pay any rate charge or fee may retermination of service to the property, the but not limited to, all attorney's fees and concerns the limited to an available sanitary sewer with property owner shall be required to conneed. The Applicant and District agree that the property owners the property and the terms of this heirs, executors, administrators, personal adesignees, and transferees. 	District must a made to the second point the Applicated in connect monthly user result in a lien cost of which collection cost of y damages as glect or culpal in three hundred to the District to the District or Sagreement by Agreement by Sagreement by Sa	except and approve all work and materials ever mains. Any violation of this action to be removed and replaced at the cant's premises at all reasonable times to extion with the District's service or which rates, capacity charges, and tap fees. The against the property and/or the will be borne by Applicant, including, so a result of any failure to supply service bility on the part of the District. The district of the property line, the let's sanitary sewer system. Initary sewer service touches and bind the District and Applicant and their
The parties hereto have read and fully underst provisions.	and the above	provisions and agree to comply with said
FALLICREEK 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	
	No	tary Public
**************	Ke ******	sident of County
Inspector <u>Luce</u> Date Inspected 1/31/25 Reason for Rejecton	_ Approved	Rejected
Date Reinspected	Approved	Rejected
Notes: Size Pipe <u>らい</u> Type Pipe <u>SDに</u> 多ら		
Basement Yes No		North 1
Sump Pump <u>Yes</u> No		North
Downspout to Ground Yes No		~
Septic Tank Pumped & Filled <u>Yes No</u> Contractor D. R. Wutsou		Drawing
Special Conditions		
Existing HomeNew Construction		+
New Construction		attached
		a pictores
		attached





