

Rev. 11/84

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

| APPLICATION FOR SEWER PERMIT Nº | 001863 |
|--|-----------|
| Permit No Date 8/31/90 | |
| Permit Void 90 days from Date of Issuance | |
| Owner Name C&D. Vonter Day | |
| Property Address //e Mulling | 1. |
| Lot #P.O. Box | |
| Town Ingolls, IN Zip Code (10048 | |
| Phone Water Meter | |
| s_100,00 Tap on Fee Paid | |
| s Inspection fee paid | |
| Application | |
| Application is hereby made for connection to the Fall Creek Region Waste District Sewer System for the above listed property - Permit Type Residential , Commercial , Industrial , or Governmental, Institutional . User Information | e: / |
| 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 d authorized representative before backfilling and final connection is ma to the main sewer lines. Any violation of applicable regulations will cause all lines and appurtenances in violation to be removed and replace | ne uly |
| The Fall Creek Regional Waste District is responsible for the insp 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. | |
| V Q D | |
| A Chin Danien | |
| APPLICANT(S) SIGNATURE | |
| INSPECTOR B Rejected 8-31-92 Approved Rejected | k |
| | |
| Date reinspected | |
| Notes: Approved Rejected | |
| Size Pipe 6 " Type Pipe PUC | |
| Basement Yes No X | North |
| Sump Pump Yes No X | |
| Downspout to Ground Yes X No | |
| Septic Tank Pumped & filler | |
| contractor Wilson Conder | |
| Special Conditions New Const 1000 | |
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