



FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO Box 59
Pendleton, IN 46064-0059 778-7544

add order
on file

222838600

APPLICATION FOR SEWER PERMIT

No 2168

Date 12/27/94

Permit Void 90 days from Date of Issuance

Owner Name John Nelson

Property Address 1793 Raccoon Way

Lot # 33 - Hickory Hills East P.O. Box _____

Town Pendleton, IN Zip Code 46064

Phone 317-897-7782 City Water _____ Well ☒

\$ 700.00 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.

William Rader
APPLICANT(S) SIGNATURE

INSPECTOR B. S.

Date inspected 1-9-95 Approved ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe 4 "

Type Pipe PVC

Basement Yes _____ No ☒

Sump Pump Yes _____ No ☒

Downspout to Ground Yes ☒ No _____

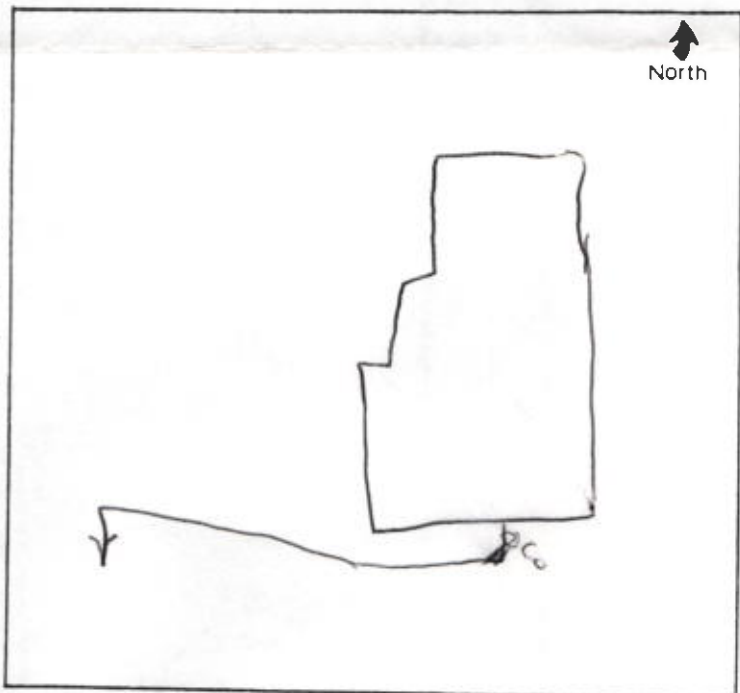
Septic Tank Pumped & filled Yes _____ No ☒

Contractor DM Colter

Special Conditions _____

Existing Home _____

New Construction ☒





FALL CREEK REGIONAL WASTE DISTRICT

3033 E. 520 West PO BOX 59
Pocatello, ID 83401-0059 798-7541
303887600

No 5168

REGISTRATION AND SERVICE TARIFF

10/20/94

NAME: John Nelson
ADDRESS: 1993 Pioneer Way
CITY: 33 - Henry Hill East
STATE: IDAHO
ZIP: 83417-7522
PHONE: 798-7541

ALL customers will receive a bill for the amount of the
rate. The bill is due on the 15th day of the month.
If the bill is not paid by the 15th day of the month,
the account will be delinquent. If the account is
delinquent, the district will suspend service.
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