add order on file 13 - 50629.99 $R /_{TA}$ FALL CREEK REGIONAL WASTE DISTRICT Ct .EAN PO Box 59 9378 S. 650 West \mathbf{F} TOMORROW D 46064-0059 778-7544 Pendleton, IN TODAY: Nº 2141

APPLICATION FOR SEWER PERMIT	11. 214
Date 9/30/94	
Permit Void 90 days from Date of Issuance	
Owner Name Cross MANN COMMUNITIES, Inc.	
Property Address 150 Oxford Avenue	
Lot # 19 P.O. Box	
Town pendleton, IN zip code 46064	
Phone City Water Well	·
\$700.00 Tap on Fee Paid	
= 3500 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.

	APPLICANT(S) S	SIGNATURE	ligent	-
******	*************** INSPEC1	/	******************	¥
Date inspected	·		_ Rejected	
Reason for rejection	<u> </u>	<u> </u>		
Date reinspected		Approved	Rejected	
Notes: Size Pipe	14			<u></u>
Type Pipe WC				N
Basement Yes No	••		[]	
Sump Pump Yes No			Hurse	
Downspout to Ground Yes	NK		19 600"	
Septic Tank Pumped & fill	led Yes No	_	45	
Contractor Hammer K		- MAIN	"\	
Special Conditions	·	-		
·····		_	Over hr	
Existing Home	_			
New Construction -				



CONSULTING ENGINEERS

L A N D S U R V E Y O R S 9940 Allisonville Rd. + P.O. Ber 509007 + Indianapolis, 84 46250 (317) 849-5935 + 1-800-728-6917 + FAX: (317) 849-5942 JOB ID ______ CF.19

CONTROL # 21318 TRI

