720.00 R/w FALL CREEK REGIONAL WASTE DISTRICT CLEAN D OMORROW F Box 44, Pendleton, Indiana 46064 TODAY ! 3-0000720 Nº 000036 APPLICATION FOR SEWER PERMIT 7-26-85 Date Permit No. Permit Void 90 days from Date of Issuance/ Owner Name Harold Hulse Property Address R2 Box 34 190 P.O. Box _____ Lot # , IN Zip Code _______ 4606 4-95 enditor Town 778-2860 Water Meter _____ Phone ____ Tap on Fee Paid 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. Harola Hula APPLICANT (S) SIGNATURE **** ****** INSPECTOR BON Date inspected 8-14-85 Approved _____ Rejected ____ Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe **7** North Type Pipe PUC Basement Yes No 🕅 Sump Pump Yes No X Downspout to Ground Yes / No Septic Tank Pumped & filled Yes Nod Contractor CAR Special Conditions