

put in Ber's
mailbox
8/6/01

ALL CREEK REGIONAL WASTE DISTRICT

9378 S 650 WEST, P.O. BOX 59, PENDLETON, IN 46064

765-778-7544

AGREEMENT FOR SANITARY SEWER SERVICE

add order
on file

4337

26-00830.00

made and entered into this 2nd day of May, 2001, between FALL CREEK REGIONAL WASTE DISTRICT ("District") and Walter Spangler ("Applicant") regarding the provision of sanitary sewer service, and the assignment of capacity in, and connection to, the District's facilities for the premises located at 203 Marcy Ave.

NOW THEREFORE, the parties, in consideration of the mutual promises set out in this Agreement, the receipt and sufficiency of which is hereby acknowledged, agree as follows:

1. The Applicant agrees that all workmanship and materials shall conform to all District ordinances and the District's construction standards. District must accept and approve all work and materials before backfilling and final connection is made to the sewer mains. Any violation of this provision will cause all lines and appurtenances in violation to be removed and replaced at the Applicant's expense.
2. The District shall have the right to enter upon the Applicant's premises at all reasonable times to inspect, repair, or replace any equipment used in connection with the District's service or which has an impact on said service.
3. The Applicant shall be responsible for all monthly user rates, capacity charges, and tap fees. The failure to pay any rate charge or fee may result in a lien against the property and/or the termination of service to the property, the cost of which will be borne by Applicant, including, but not limited to, all attorney's fees and collection costs.
4. The District shall not be responsible for any damages as a result of any failure to supply service unless said damages are due to default, neglect or culpability on the part of the District.
5. If there is an available sanitary sewer within three hundred (300) feet of the property line, the property owner shall be required to connect to the District's sanitary sewer system.
6. The Applicant and District agree that the provision of sanitary sewer service touches and concerns the property and the terms of this Agreement bind the District and Applicant and their heirs, executors, administrators, personal representatives, successors, agents, attorneys, assigns, designees, and transferees.

The parties hereto have read and fully understand the above provisions and agree to comply with said provisions.

FALL CREEK REGIONAL WASTE DISTRICT

Signature Jon Carey

APPLICANT

Signature Walter Spangler

STATE OF INDIANA)

) SS:

COUNTY OF MADISON)

SUBSCRIBED and sworn to before me this 2nd day of May, 2001.

My Commission Expires:

2-20-2008

Signature Deborah L. Wilson

Printed Deborah L. Wilson

Notary Public

Resident of Madison County

INSPECTOR Ben DATE INSPECTED 8-6-01 APPROVED ✓ REJECTED _____

REASON FOR REJECTION _____

DATE REINSPECTED _____ APPROVED _____ REJECTED _____

NOTES:

SIZE PIPE 6 TYPE PIPE 35 c by winder

BASEMENT YES _____ NO ✓

SUMP PUMP YES _____ NO ✓

DOWNSPOUT TO GROUND YES ✓ NO _____

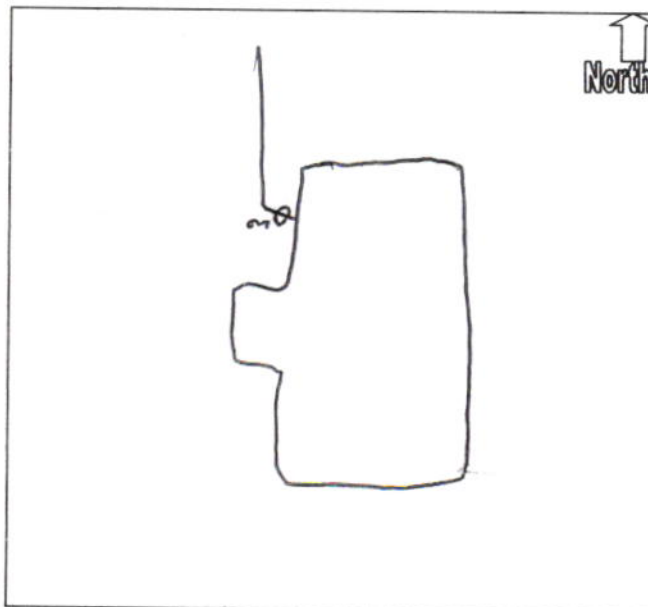
SEPTIC TANK PUMPED & FILLED YES ✓ NO _____

CONTRACTOR TED'S

SPECIAL CONDITIONS _____

EXISTING HOME ✓

NEW CONSTRUCTION _____



SUPPLEMENTAL UTILITY CONFLICT INFORMATION

N-2214

PROPERTY/STREET/ALLEY CROSSED

203 MARCY AVE

LOT

CITY PENNINGTON

COUNTY

MADISON

UTILITY LOCATE PERFORMED BY

BUSTAMANTE-BAYLESS

DATE

7-11-23

ACTUAL PROTECTIVE METHOD(S) AGAINST SEWER TRANSECTIONS (LIST ALL THAT APPLY):

GAS MAIN

GAS SVC

DOCUMENT SIZE/DEPTH OF SEWERS WHEN CROSSING WITH PROPOSED GAS PIPELINE.

	#1	#2	#3	#4	#5	#6
SEWER DIAMETER	"	"	"	"	"	"
SEWER DEPTH	"	"	"	"	"	"
GAS DEPTH	"	"	"	"	"	"

PROTECTIVE METHODS AGAINST SEWER TRANSECTIONS

(A) BORING/PLOWING

1 NO FACILITIES

2 BORING SAFEGARDS

3 STEEL CONDUIT

4 STEEL CARRIER

INSTALLATION TYPE

(B) OPEN TRENCH

1 NO FACILITIES

5 OPEN EXCAVATION

INSERTION

1 NO FACILITIES

2 INSERTION/CONDUIT

INDICATE PATH

LOCATION OF SEWER FROM FIXED POINT

POINT	#FEET DIR ORIGIN	#FEET W DIR ORIGIN	DEPTH (IN)
a	9 FT.	91 FT.	73 "
b	9 FT.	79 FT.	79 "
c	9 FT.	67 FT.	78 "
d	9 FT.	54 FT.	64 "
e	9 FT.	41 FT.	33 "
f	9 FT.	26 FT.	28 "
g	9 FT.	10 FT.	24 "
h	9 FT.	-4 FT.	21 "
i	FT.	FT.	"
j	FT.	FT.	"

BORE REVIEW INSPECTOR

COMPANY

FOREMAN/CREW LEAD

COMPANY

BORE OPERATOR

COMPANY

DATE OF BORE REVIEW

SERVICE RECORD SKETCH

MAIN LOCATION _____ FT.

SERVICE TAP DIMENSIONS: _____ X _____ Y _____ Z

CURRENT TOTAL LENGTH OF ACTIVE SERVICE _____

SUPPLEMENTAL DIMENSIONS: _____ A _____ B _____ C _____ D _____ E _____ F

LENGTH OF TEST PIPE _____

SERVICE TEST PRESSURE _____ PSIG

TEST DURATION _____

TEST PERFORMED BY _____

COMPANY NAME _____

DATE _____

INDICATE
NORTH

NOTES:

CONSTRUCTED BY _____

COMPANY NAME _____

EMP. NO. _____

DATE _____

INSPECTED BY _____

COMPANY NAME _____

EMP. NO. _____

DATE _____

SUPERVISOR CARD REVIEW _____

DATE _____