



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-0012220.00

No 001051

APPLICATION FOR SEWER PERMIT

Permit No. \_\_\_\_\_ Date 12-17-85
Permit Void 90 days from Date of Issuance
Owner Name Robert Davids
Property Address 208 Spring Mill Rd
Lot # \_\_\_\_\_ P.O. Box \_\_\_\_\_
Town Anderson, IN Zip Code 46013
Phone 644-1901 Water Meter \_\_\_\_\_
\$ 150.00 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 [checked], Commercial \_\_\_\_\_, Industrial \_\_\_\_\_, or Governmental/Institutional \_\_\_\_\_.

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.

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.

Robert L. Davids (handwritten signature)

APPLICANT(S) SIGNATURE

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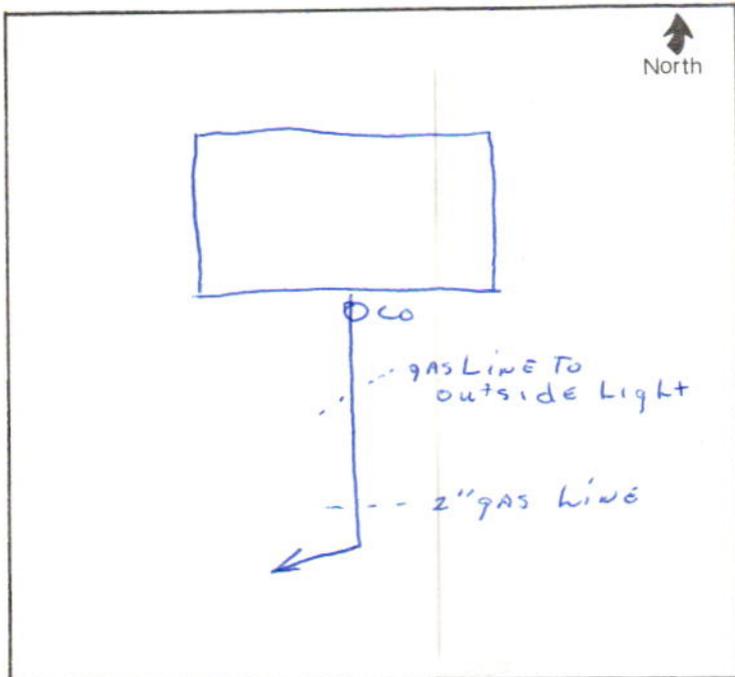
INSPECTOR BEN

Date inspected 12-19-85 Approved [checked] Rejected \_\_\_\_\_

Reason for rejection \_\_\_\_\_

Date reinspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Notes:
Size Pipe 6"
Type Pipe PVC
Basement Yes No [checked]
Sump Pump Yes No [checked]
Downspout to Ground Yes [checked] No
Septic Tank Pumped & filled Yes [checked] No
Contractor Eytchison Const
Special Conditions \_\_\_\_\_



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