add order on fele R/ FALL CREEK REGIONAL WASTE DISTRICT CLEAN 13-40340.00 TOMORROW Box 44, Pendleton, Indiana 46064 D TODAY! in Nº 001915 APPLICATION FOR SEWER PERMIT Permit No. Date Permit Void 90 days from Date of Issuance Dindhy D. Jones Owner Name Village Property Address P.O. BOX Lot # 2 , IN Zip Code 4606 Town Water Meter Phone 700 00 Tap on Fee Paid 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. APPLICANT (S) SIGNATURE ***** INSPECTOR Dort Date inspected 5 11/53 Approved Rejected Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe ____ North Type Pipe ____ Pre Basement Yes Sump Pump Yes 🔊 Downspout to Ground NO Septic Tank Pumped & filled No A A A Contractor Defux homos Special Conditions 5