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F	CLEAN TOMORROW TODAY!	D

FALL CREEK REGIONAL WASTE DISTRICT

3-0/00323.00

Box 44, Pendleton, Indiana 46064

Nº 001521 APPLICATION FOR SEWER PERMIT Permit No. Date / Permit Void 90 days from Date of Issuance Owner Name 100 a. a adle Property Address 221 5 P.O. Box Lot # , IN Zip Code Town AX - 4042 Water Meter Phone Tap on Fee Paid EX 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.

Date inspected 5-27 Appro	INSPECTOR	***********************	***
Reason for rejection	oved Re		
Date reinspected	Approved	Rejected	
Notes: Size Pipe Type Pipe Basement Yes No X Sump Pump Yes No X Downspout to Ground Yes No X Septic Tank Pumped & filled Yes Contractor Special Conditions	DRANE No DW		North