



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1-000 1345.00

Nº 001496

APPLICATION FOR SEWER PERMIT

Permit No. _____ Date 4-16-86
Permit Void 90 days from Date of Issuance
Owner Name Gertrude Conger
Property Address 222 E. Second St
Lot # _____ P.O. Box _____
Town Ingalls, IN Zip Code 46048
Phone 485-4420 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 ☒ 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.

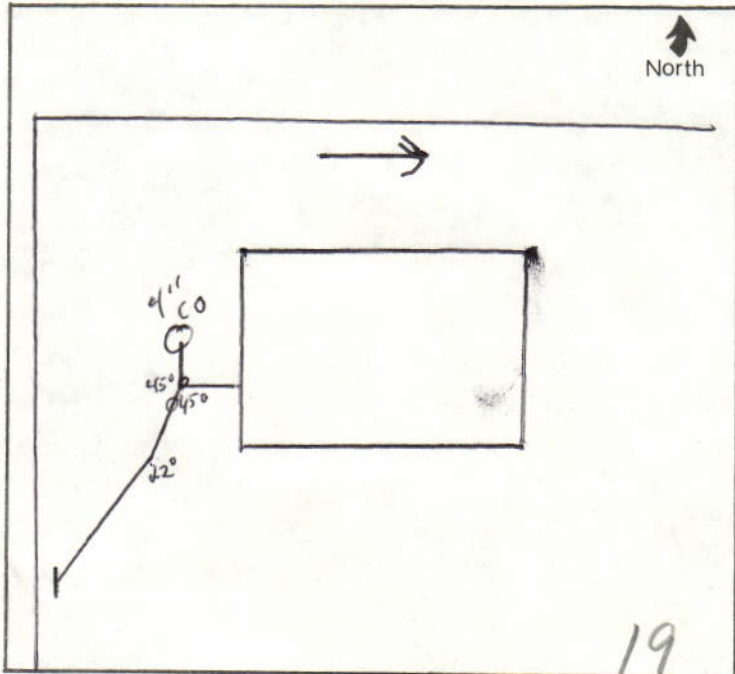
Gertrude P. Conger
APPLICANT(S) SIGNATURE

INSPECTOR Randy

Date inspected 5-29-86 Approved ☒ Rejected _____
Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:
Size Pipe 6"
Type Pipe PVC
Basement Yes _____ No ☒
Sump Pump Yes _____ No ☒
Downspout to Ground Yes ☒ No _____
Septic Tank Pumped & filled Yes _____ No ☒
Contractor HARRY KOSAT
Special Conditions OWNER WILL TAKE CARE OF





FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO Box 59
Pendleton, IN 46064-0059 778-7544

21-01345.01

Nº 2210

APPLICATION FOR SEWER PERMIT

Date

6/5/95

Permit Void 90 days from Date of Issuance

Owner Name

Phillip Haygood

Property Address

222 E Second Street

Lot #

P.O. Box

Town

Ingalls

,

IN

Zip Code

46048

Phone

City Water

Well

\$

100

Tap on Fee Paid

re-connect

\$

Inspection fee paid

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I have read and fully understand the above provisions and agree to comply by said provisions.

APPLICANT(S) SIGNATURE

INSPECTOR

Date inspected

6-7-95

Approved

Rejected

Reason for rejection

Date reinspected

Approved

Rejected

Notes:

Size Pipe

6

"

Type Pipe

PVC

Basement Yes

No X

Sump Pump Yes

No X

Downspout to Ground Yes X No

Septic Tank Pumped & filled Yes No X

Contractor

Self

Special Conditions

Existing Home

New Construction

X

