



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

3-0306698.01

Nº 001710

APPLICATION FOR SEWER PERMIT

Permit No. _____ Date 1-9-90
Permit Void 90 days from Date of Issuance
Owner Name Jerry Holloway
Property Address 227 SO. Pendleton Ave.
Lot # _____ P.O. Box _____
Town Pendleton, IN Zip Code 46064
Phone 778-3765 Water Meter _____"
\$ _____ Tap on Fee Paid
\$ _____ 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 TIM

Date inspected 1-9-90 Approved ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe 4"

Type Pipe PVC

Basement Yes ☒ No _____

Sump Pump Yes _____ No ☒

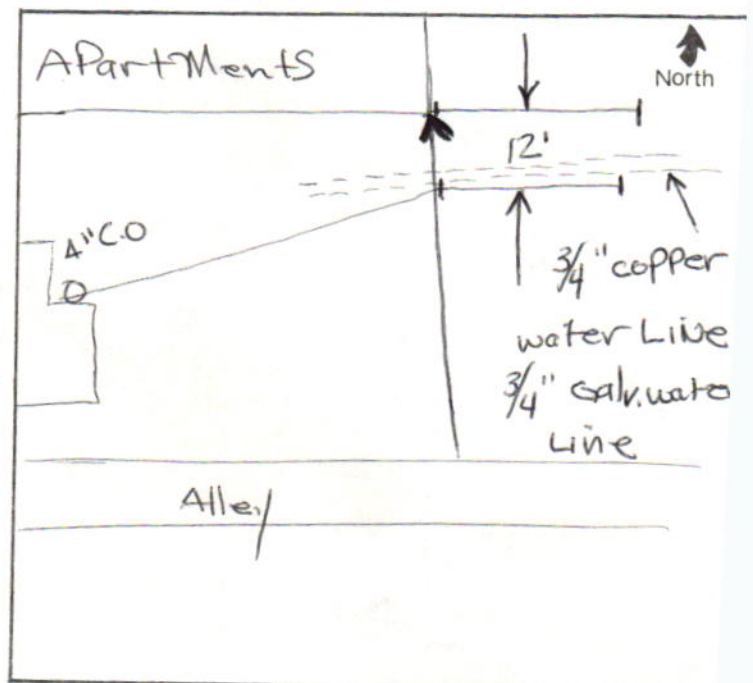
Downspout to Ground Yes ☒ No _____

Septic Tank Pumped & filled Yes ☒ No _____

Contractor Dick Godbey

Special Conditions Replaced one

Joint VCP with 8x8x4 PVC TEE
for new tap.





3-06698.04

FALL CREEK REGIONAL WASTE DISTRICT

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

Rehab

APPLICATION FOR SEWER PERMIT

No 2744

Date 4-4-2000

Permit Void 90 days from Date of Issuance

Owner Name

Ralph Willoughby

Property Address

227 South Pendleton Ave.

Lot #

P.O. Box

Town

Pendleton

,

IN

Zip Code

46064

Phone

City Water

Well

✓

\$

N/A

Tap on Fee Paid

\$

N/A

Inspection fee paid

lateral replacement

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

APPLICANT(S) SIGNATURE

INSPECTOR

B

Date inspected 3-30-00

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

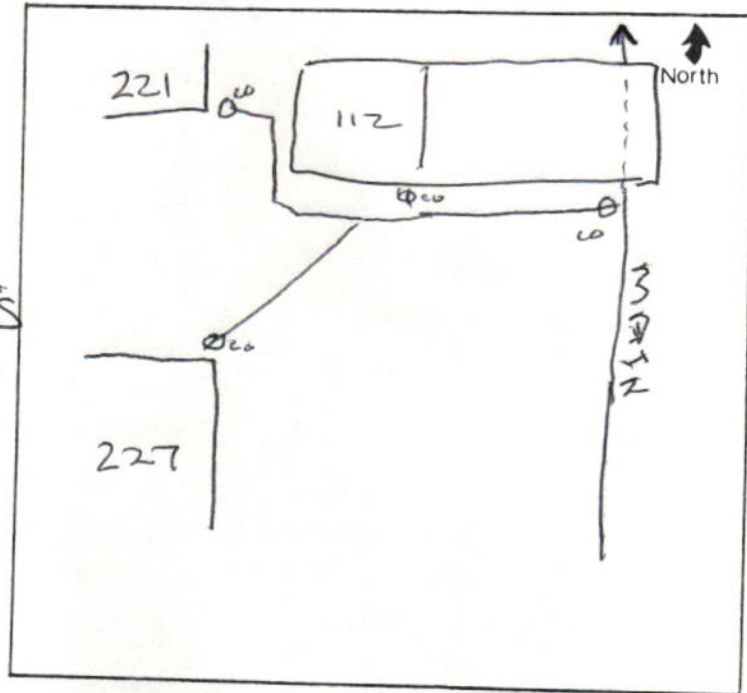
TEO/EARL DAVIS

Special Conditions

Existing Home

X

New Construction



Gidw.

PROJECT Phase II SHEET _____ OF _____

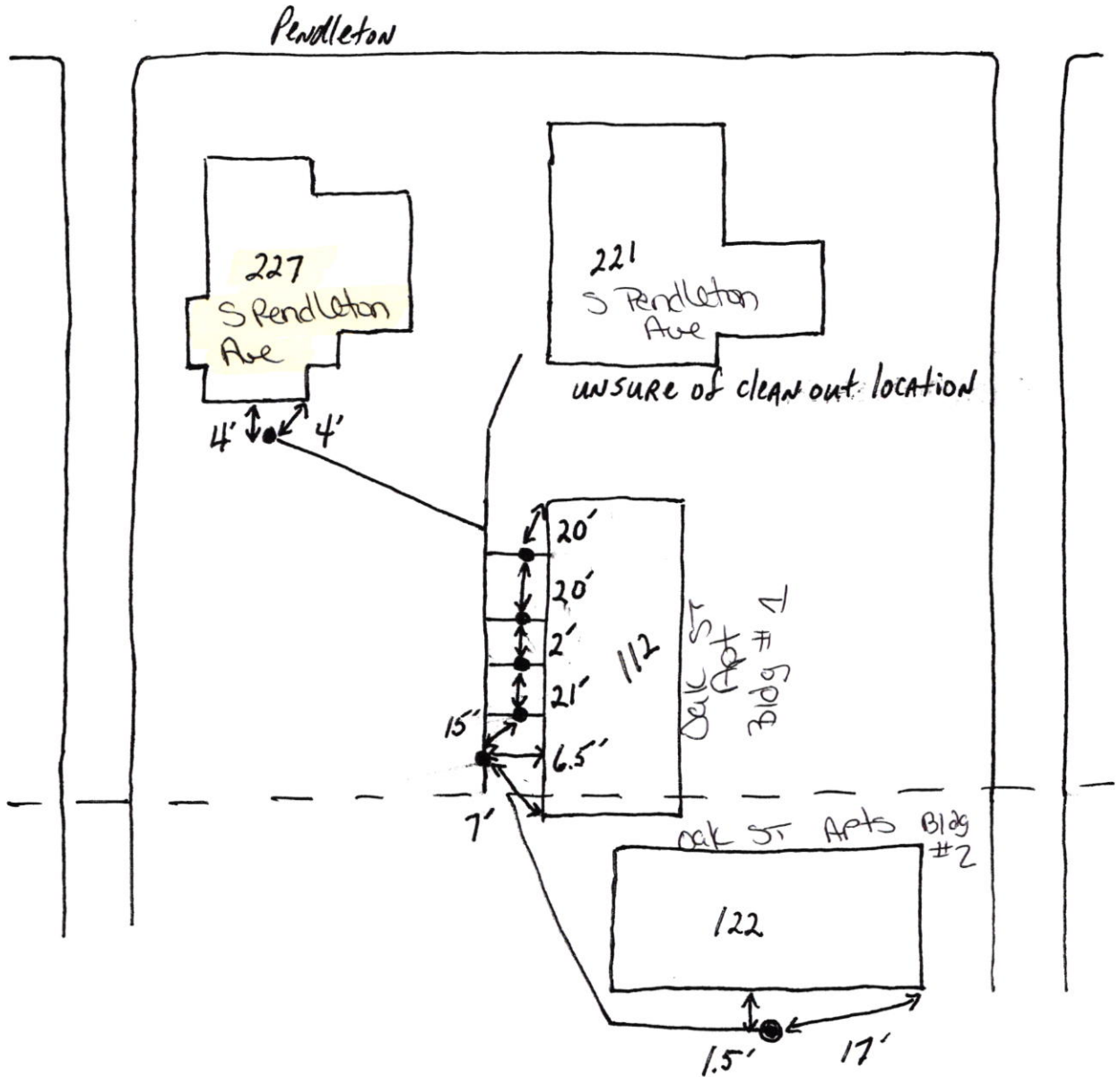
SUBJECT _____ DATE _____

JOB NO. 4447

★ BY Ring Bros.

Ring Const. offices & Apts.

N →



★ This work was completed by Ring Const.

San S Pendulutan

SAT Phase II

6-21-18

