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FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1-0000765.00

APPLICATION F	OR SEWER PERMIT	Nº 000238
Permit No.	Date 10-3-85	
Permit Void 90 days from Date of I	suance	
Owner Name Horace L	car	
Property Address _ 240 ML	initold	
Lot #	P.0. Box 51	
Town Jugalle	, IN Zip Code 46048	
Phone	Water Meter Ag.	
\$	id	
s25 M Inspection fe	e paid	
Application is hereby made fo Waste District Sewer System for th	r connection to the Fall Creek e above listed property - Perm	

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.

AP)	LICANT(S) SIGNATURE	**************************************	
Date reinspected	Approved	Rejected	
Notes: Size Pipe Type Pipe Basement Yes Sump Pump Yes Nov Downspout to Ground Yes Septic Tank Pumper & filled Contractor Special Conditions	NOV		North
		Q	00