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FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO Box 59  
Pendleton, IN 46064-0059 778-7544 22-15621.00

Nº 2370

APPLICATION FOR SEWER PERMIT

Date 5/3/96

Permit Void 90 days from Date of Issuance

Owner Name Mustin Builders Todd Hollingsworth

Property Address Ma 24<sup>th</sup> Estate Dr.

Lot # 62 P.O. Box \_\_\_\_\_

Town Anderson, IN Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ City Water \_\_\_\_\_ Well ☒

\$ 400 Tap on Fee Paid

\$ 2156 Capacity  
~~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 \_\_\_\_\_

Date inspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Reason for rejection \_\_\_\_\_

\_\_\_\_\_  
Date reinspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Notes:  
Size Pipe \_\_\_\_\_"  
Type Pipe \_\_\_\_\_  
Basement Yes \_\_\_\_\_ No \_\_\_\_\_  
Sump Pump Yes \_\_\_\_\_ No \_\_\_\_\_  
Downspout to Ground Yes \_\_\_\_\_ No \_\_\_\_\_  
Septic Tank Pumped & filled Yes \_\_\_\_\_ No \_\_\_\_\_  
Contractor \_\_\_\_\_  
Special Conditions \_\_\_\_\_  
\_\_\_\_\_  
Existing Home \_\_\_\_\_  
New Construction \_\_\_\_\_





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Nº 2370

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Property Address MDA 24 W Estate Dr.

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Town Anderson, IN Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ City Water \_\_\_\_\_ Well ☒

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\$ 2156.00 Capacity Inspection fee paid

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APPLICANT(S) SIGNATURE

\*\*\*\*\*

INSPECTOR Tim

Date inspected 5-3-96 Approved ☒ Rejected \_\_\_\_\_

Reason for rejection \_\_\_\_\_

Date reinspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Notes: 6 "

Size Pipe PVC

Type Pipe PVC

Basement Yes ☒ No ☒

Sump Pump Yes ☒ No \_\_\_\_\_

Downspout to Ground Yes ☒ No \_\_\_\_\_

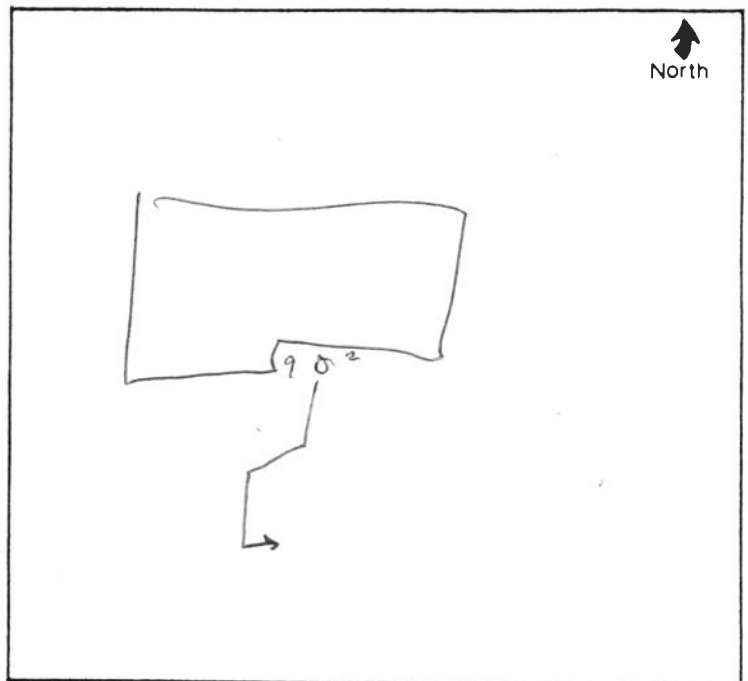
Septic Tank Pumped & filled Yes ☒ No \_\_\_\_\_

Contractor Bolten

Special Conditions \_\_\_\_\_

Existing Home \_\_\_\_\_

New Construction ☒



DATE	INVOICE NO.	DESCRIPTION	INVOICE AMOUNT	DEDUCTION	BALANCE
5-3-96 V 144		Fall Creek Regional Waste Dist. J 1408-108 J 1411-108 Tap Fees			
CHECK DATE	5-3-96	CHECK NUMBER	27420	TOTALS	\$5,112.00
					\$5,112.00

PLEASE DETACH THIS PORTION AND RETAIN FOR YOUR RECORDS



**MUSTIN BUILDERS, INC.**

810 CENTRAL AVENUE  
ANDERSON, IN 46012  
PH. 317-644-8502

**SOCIETY NATIONAL BANK**  
ANDERSON, IN 46015  
6-704-412

27420

PAY: Five Thousand One Hundred Twelve and 00/100 Dollars

DATE	CHECK NO.	AMOUNT
5-3-96	27420	\$5,112.00

PAY  
TO THE  
ORDER  
OF  
Fall Creek Regional Waste Dist.

*John Mustin*

⑈027420⑈ ⑆041207040⑆00700⑈ 15984⑈