16-60748.00

#8431

Fall Creek Regional Waste District 9378 S 650 W, P.O. Box 59, Pendleton, IN 46064 765-778-7544

Agreement for Sanitary Sewer Service

This Agreement made and entered into this 1 Regional Waste District ("District") and Arbor Ho	mes	("Applicant") regarding the
provision of sanitary sewer service, and the assign facilities for the premises located atCold Spring	nment of capac s @ Huntzinge	ity in and connection to, the District's r Farms Lot 44
Street Address: 280 COLD SPRING	rs Dr.	
Now therefore, the parties, in consideration or receipt and sufficiency of which is hereby acknown	of the mutual p vledged, agree	romises set out in this Agreement, the as follows:
 The Applicant agrees that all workmanshin and the District's construction standards. before backfilling and final connection is provision will cause all lines and appurter Applicant's expense. The District shall have the right to enter use inspect, repair, or replace any equipment has an impact on said service. The Applicant shall be responsible for all failure to pay any rate charge or fee may retermination of service to the property, the but not limited to, all attorney's fees and of the District shall not be responsible for an unless said damages are due to default, needs. If there is an available sanitary sewer with property owner shall be required to conneed. The Applicant and District agree that the concerns the property and the terms of this heirs, executors, administrators, personal designees, and transferees. 	District must a made to the se mances in violation pon the Application connect monthly user in result in a lien a cost of which collection costs my damages as reglect or culpation three hundred to the District provision of sa s Agreement b	ccept and approve all work and materials wer mains. Any violation of this tion to be removed and replaced at the cant's premises at all reasonable times to tion with the District's service or which rates, capacity charges, and tap fees. The against the property and/or the will be borne by Applicant, including, as a result of any failure to supply service bility on the part of the District. ed (300) feet of the property line, the ct's sanitary sewer system. nitary sewer service touches and ind the District and Applicant and their
The parties hereto have read and fully underst provisions. FALL CREEK REGIONAL WASTE DISTRICT	and the above	provisions and agree to comply with said APPLICANT
Signature		Signature
STATE OF INDIANA)) SS: COUNTY OF MADISON)		
SUBSCRIBED and sworn to before me this _	day of	, 20
My Commission Expires:	Signature	
**********		tary Public sident of County ********
Inspector John Date Inspected 5/2424	_ Approved	X Rejected
Reason for Rejecton Date Reinspected	Approved	Rejected
Notes: Size Pipe Type Pipe SDL 35 Basement Yes No Sump Pump Yes No Downspout to Ground Yes No Septic Tank Pumped & Filled Yes No Contractor DR watson Special Conditions Existing Home New Construction		Drawing 1 Didec
		attached



