add order on file $\mathbf{R}/_{\mathbf{x}}$ FALL CREEK REGIONAL WASTE DISTRICT CLEAN 9378 S. 650 West PO Box 59 TOMORROW D Pendleton, IN 46064-0059 778-7544 TODAY 21-03660.00 Nº 2381 APPLICATION FOR SEWER PERMIT Date 6-6-96 Permit Void 90 days from Date of Issuance Owner Name Calvin Hardesty Property Address 301 Huston Lot # 19, Kick Cruck States P.O. Box ____, IN Zip Code 46048 malls TOWA City Water Well Phone s_270000 Application is hereby made for connection to the Fall Creek Regional Waste District Sever 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. Hendlight I APPLICANT(S) SIGNATURE 7:00 Pm. INSPECTOR Date inspected 6-1-76 Approved Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe 6" 7 Type Pipe SDR 3 North Basement Yes No Sump Pump Yes NO Downspout to Ground Yes L'CC Septic Tank Pumped & filled Yes No Contractor Md GU (J avatin Special Conditions Deport of Existing Home New Construction Bev. 117.84

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