

332 - 21-00944.01
334 - 21-00942.00

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APPLICATION FOR SEWER PERMIT

Nº 2711

Date 10-18-99

Permit Void 90 days from Date of Issuance

Owner Name Harold Dean Sears II

Property Address 300, 320 N Swain

Lot ~~5~~ 2 679 680 681

P.O. Box

Town Inga

, IN Zip Code

Phone 317-485-6168

City Water

Well

\$ 5370.00

Tap on Fee Paid *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 X, 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 2-16-00

Approved

Rejected

Reason for rejection

Date reinspected

Approved

Rejected

Notes:

Size Pipe 6

Type Pipe PCL

Basement Yes No ☒

Sump Pump Yes No ☒

Downspout to Ground Yes ~~X~~ No

Septic Tank Pumped & filled Yes No X

Contractor DGR

Special Conditions

Existing Home

New Construction ☒

