ateral Replacement

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	day of,	20, between Fall Creek
Regional Waste District ("District") and		("Applicant") regarding the
provision of sanitary sewer service, and the assignr	nent of capacity in and	connection to, the District's
facilities for the premises located at350		endleton.

Now therefore, the parties, in consideration of the mutual promises set out in this Agreement, the receipt and sufficiency of which is hereby acknowledged, agree as follows:

- The Applicant agrees that all workmanship and materials shall conform to all District ordinances
 and the District's construction standards. District must accept and approve all work and materials
 before backfilling and final connection is made to the sewer mains. Any violation of this
 provision will cause all lines and appurtenances in violation to be removed and replaced at the
 Applicant's expense.
- The District shall have the right to enter upon the Applicant's premises at all reasonable times to inspect, repair, or replace any equipment used in connection with the District's service or which has an impact on said service.
- 3. The Applicant shall be responsible for all monthly user rates, capacity charges, and tap fees. The failure to pay any rate charge or fee may result in a lien against the property and/or the termination of service to the property, the cost of which will be borne by Applicant, including, but not limited to, all attorney's fees and collection costs.
- 4. The District shall not be responsible for any damages as a result of any failure to supply service unless said damages are due to default, neglect or culpability on the part of the District

unless said damages are due to default, ne 5. If there is an available sanitary sewer with property owner shall be required to conne 6. The Applicant and District agree that the property and the terms of thi heirs, executors, administrators, personal designees, and transferees.	nin three hund ect to the Distr provision of s s Agreement	lred (300) feet of the propriet's sanitary sewer system anitary sewer service touch bind the District and Appl	erty line, the m. ches and licant and their
The parties hereto have read and fully underst provisions.	tand the above	e provisions and agree to	comply with said
FALL CREEK REGIONAL WASTE DISTRICT		APPLICANT	
Signature		Signature	
STATE OF INDIANA)) SS: COUNTY OF MADISON)			
SUBSCRIBED and sworn to before me this _	day of	, 20	
My Commission Expires:	Signature		
************		otary Public	County
Inspector Date Inspected 8-25-16 Reason for Rejecton			_
Notes: / //	Approved	Rejected	_
Size Pipe Type Pipe // 35 Basement Yes No Sump Pump Yes No Downspout to Ground Yes No Septic Tank Pumped & Filled Yes No Contractor Type Pipe // 35 Septic Tank Pumped & Filled Yes No Special Conditions No Special Conditions No Existing Home No New Construction		35° Detra	North O





