

## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1-0002645.00

APPLICATION FOR SEWER PERMIT Date Permit No.

Permit Void 90 days from Date of Issuance Owner Name Hilda Wilson Property Address 402 N. Houston Tragal/5, IN Zip Code 46048
485-4782 Water Meter Ingaels \$ 150 00 Tap on Fee Paid 25 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 \_\_\_\_\_\_, or Governmental/ . User Information Institutional

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.

Hilda L. Wilson APPLICANT(S) SIGNATURE Date inspected 6-/2-86 Approved Rejected Reason for rejection Date reinspected Approved Rejected

Size Pipe Type Pipe \_ PUC Basement Yes No 7 Sump Pump Yes No Downspout to Ground Yes X No Septic Tank Pumped & filled Yes No Contractor Kemenly Special Conditions OWNENWI

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