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 5 day of 1000 , 2014, between Fall Creek Regional Waste District ("District") and ("Applicant") regarding the provision of sanitary sewer service, and the assignment of capacity in and connection to, the District's facilities for the premises located at 404 S Franklin ST, Pendulton.	
Now therefore, the parties, in consideration of the n receipt and sufficiency of which is hereby acknowledged	The state of the s
before backfilling and final connection is made t provision will cause all lines and appurtenances Applicant's expense. 2. The District shall have the right to enter upon the	t must accept and approve all work and materials to the sewer mains. Any violation of this in violation to be removed and replaced at the example Applicant's premises at all reasonable times to
inspect, repair, or replace any equipment used in has an impact on said service.3. The Applicant shall be responsible for all month failure to pay any rate charge or fee may result in	ly user rates, capacity charges, and tap fees. The n 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. 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. If there is an available sanitary sewer within three hundred (300) feet of the property line, the 	
 The Applicant and District agree that the provisi concerns the property and the terms of this Agre heirs, executors, administrators, personal represe designees, and transferees. 	on of sanitary sewer service touches and ement bind the District and Applicant and their
The parties hereto have read and fully understand the provisions.	e above 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: Signa	ature
Prin	ted
	Notary Public
************	Resident of County
Inspector SN Date Inspected 8/5/14/ App	roved Rejected
Reason for Rejecton	
Date Reinspected Appr Notes:	oved Rejected
Size Pipe 6 11 Type Pipe 35	1 .
Basement Yes No	North North
Sump Pump <u>Yes No</u>	La H
Downspout to Ground Yes No	-45
Septic Tank Pumped & Filled Yes No	(2)
Contractor Royal Flush	
Special Conditions Existing Home	1 1 1
New Construction	404