

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

	FOR SEWER PERMIT Nº 000663	
Pormit No.	Date 11-18-85	
Permit Void 90 days from Date of		
Owner Name William	1	
	RNie Lu Ave	
	P.O. Box	
TOWN ANDRR.SON	, IN Zip Code 46013	
Phone $l_242 - 828$	9 Water Meter "	
11-00		
\$	'aid	
s	ee paid	
Waste District Sewer System for the Residential Commercial Institutional User Info All workmanship and materials District Ordinance as described in Acceptance and approval must be ma authorized representative before b	For connection to the Fall Creek Regional the above listed property - Permit Type: , Industrial, or Governmental/ prmation is shall conform to the standards of the in Ordinance 84-2 and 84-3 as amended. made by the District inspector or his duly backfilling and final connection is made plation of applicable regulations will	
approval of materials, and instal materials and installation and an sole responsibility of the proper	te District is responsible for the inspection Ilation techniques only. All costs for my liabilities resulting from same is the rty owner. Stand the above provisions and agree to	n,
	r(S) SIGNATURE	

	ISPECTOR DEN	
Date inspected 2-7-83 Approve	ed Rejected	
Reason for rejection		
Date reinspected	Approved Rejected	
Notes:	Approved Rejected	
Notes: Size Pipe"	Approved Rejected	Nort
Notes: Size Pipe" Cype Pipe	Approved Rejected	Nort
Notes: Size Pipe Type Pipe Basement Yes No X		Nort
Notes: Size Pipe Cype Pipe Basement Yes No X Sump Pump Yes No X		Nort
Notes: Size Pipe" Type Pipe" Basement Yes No X Sump Pump Yes No X Downspout to Ground Yes No	C0	Nort
Notes: Size Pipe " Type Pipe " Basement Yes No X Sump Pump Yes No X Downspout to Ground Yes No Septic Tank Pumped & filled Yes X	C0	Nort
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