

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-06240.00

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2-0006260

APPLICATION FOR SEWER PERMIT Nº 000859
Permit No. Date Date
Permit Void 90 days from Date of Issuance Owner Name 4444 5 100 W
Owner Name Settly Wearen 4444 5 700 to
Property Address 7030 & Maduson
Lot # P.O. Box
Town Oxallon, IN Zip Code 40013
Phone 642-0482 Water Meter
\$ 50.00 Tap on 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, 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 (20 Approved Rejected
Reason for rejection
Date reinspected Approved Rejected
Notes: Size Pipe 6 "
Type Pipe PVC
Type Tipe
Basement Yes No X
Sump Pump Yes No
Basement Yes No X Sump Pump Yes No X Downspout to Ground Yes XNo
Sump Pump Yes No Downspout to Ground Yes No Septic Tank Pumped & filled Yes No
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