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# FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO Box 59  
Pendleton, IN 46064-0059 778-7544

22-06460.00

## APPLICATION FOR SEWER PERMIT

Nº 2063

Date

4/20/94

Permit Void 90 days from Date of Issuance

Owner Name

Roy Ring

Property Address

4652 S. 100 West

Lot #

P.O. Box

Town

Anderson

IN

Zip Code

46013

Phone

City Water

Well

✓

\$

100.00

Tap on Fee Paid

\$

25.00

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 ☒, 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.

*Roy Ring*

APPLICANT(S) SIGNATURE

INSPECTOR

Date inspected

4/28/94

Approved

✓

Rejected

Reason for rejection

Date reinspected

Approved

Rejected

Notes:

Size Pipe

4"

Type Pipe

PVC

Basement

Yes

No

Sump Pump

Yes

No

10 ft

Downspout to Ground

Yes

No

Septic Tank Pumped & filled

Yes

No

Contractor

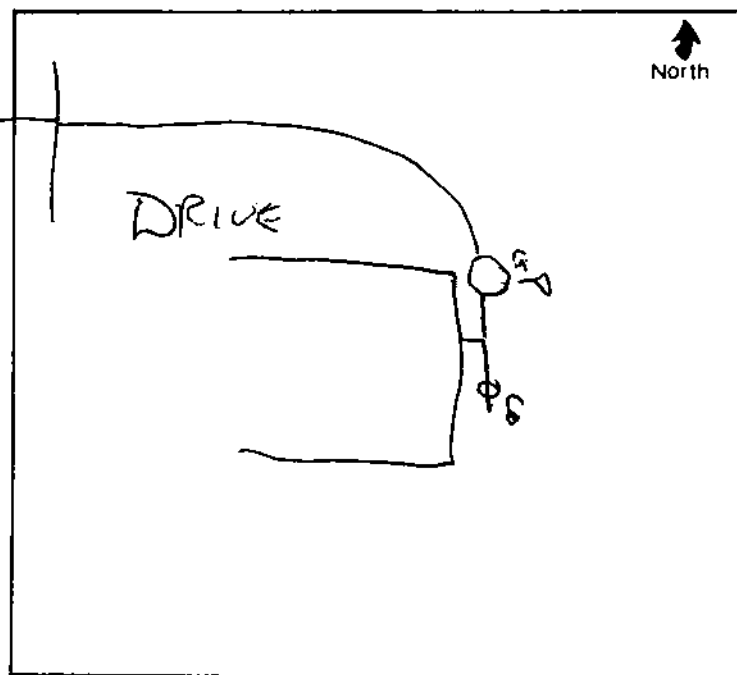
Earl Davis

Special Conditions

Existing Home

✓

New Construction





# FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-06460.00

2-0006460.00

Nº 001504

## APPLICATION FOR SEWER PERMIT

Permit No. \_\_\_\_\_ Date April 18, 1986

Permit Void 90 days from Date of Issuance

Owner Name Larvonne C. Fowler 4652 S 100 W

Property Address 6722 S. Madison

Lot # \_\_\_\_\_ P.O. Box \_\_\_\_\_

Town Anderson, IN Zip Code 46013

Phone 643-0076 Water Meter \_\_\_\_\_

\$ 150.00 Tap on Fee Paid

\$ 2500 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 ☒, 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.

Larvonne E. Fowler

APPLICANT(S) SIGNATURE

INSPECTOR BEN

Date inspected 4-25-86 Approved ☒ Rejected \_\_\_\_\_

Reason for rejection \_\_\_\_\_

Date reinspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

### Notes:

Size Pipe 6"

Type Pipe PVC

Basement Yes ☒ No \_\_\_\_\_

Sump Pump Yes \_\_\_\_\_ No ☒

Downspout to Ground Yes \_\_\_\_\_ No ☒

Septic Tank Pumped & filled Yes \_\_\_\_\_ No ☒

Contractor Delp

Special Conditions Downspouts +

Sump To Separate Pipe

home blew up

