

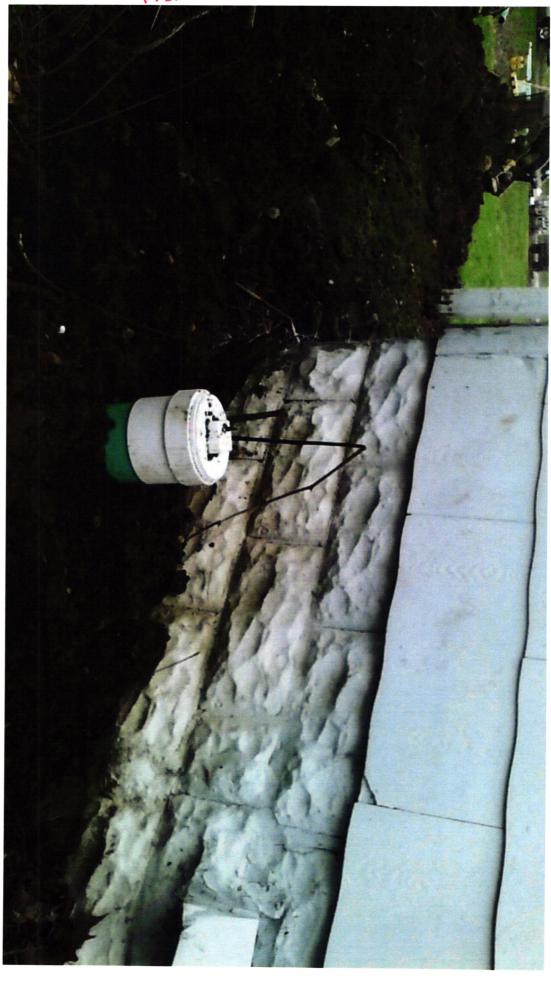
| PROJECT PhaseIF | SHEET OF     |
|-----------------|--------------|
| SUBJECT         | DATE 4-16-18 |
|                 | JOB NO 4447  |
|                 | BY AHAS      |

517 W. State

| State<br>1.5°<br>1.3' |
|-----------------------|
| Alley                 |

Ship Phase II

4.20.18





FALL CREEK REGIONAL WASTE DISTRICT 9378 S. 650 West PO Box 59 Pendleton, IN 46064-0059 778-7544

| Basement Yes X No  Sump Pump Yes No  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No  Contractor Self  Special Conditions  Existing Home  | 2205                     |
|--|--------------------------|
| Permit Void 90 days from Date of Issuance  Owner Name  |                          |
| Property Address 5/7 W State  Property Address 5/7 W State  Dot # P.O. Box  Town   |                          |
| Property Address 5/7 W State  Lot # P.O. Box  Town Plantage , IN Zip Code 46064  Phone City Water X Well  \$ NA Tap on Fee Paid Lattral Applaces  \$ Inspection fee paid  Application is hereby made for connection to the Fall Creek Reg Waste District Sewer System for the above listed property - Permit 78 Residential Commercial , Industrial , or Government  Institutional User Information  All workmanship and materials shall conform to the standards of District Ordinance as described in Ordinance 84-2 and 84-3 as amende Acceptance and approval must be made by the District inspector or his authorized representative before backfilling and final connection is to the main sewer lines. Any violation of applicable regulations with cause all lines and appurtenances in violation to be removed and reg at the owners expense.  The Fall Creek Regional Waste District is responsible for the approval of materials, and installation techniques only. All costs materials and installation and any liabilities resulting from same is sole responsibility of the property owner.  I have read and fully understand the above provisions and agree comply by said provisions.  APPLICANT(S) SIGNATURE  INSPECTOR Rejected  Reason for rejection  Date inspected Approved Rejected  Notes: Size Pipe Type Pipe Ry Basement Yes No  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No   |                          |
| Town Pursulty , IN Zip Code 46004  Phone City Water X Well  S NA Tap on Fee Paid Lattral Applace  S Inspection fee paid  Application is hereby made for connection to the Fall Creek Residential Commercial Institutional Commercial Institution Commercial Commercial Institution Co |                          |
| Town   |                          |
| Tap on Fee Paid Latitual Lipiaus    Sample   |                          |
| Inspection fee paid  Application is hereby made for connection to the Fall Creek Regulated District Sewer System for the above listed property - Permit of Residential, Commercial, Industrial, or Government Institutional User Information  All workmanship and materials shall conform to the standards of District Ordinance as described in Ordinance 84-2 and 84-3 as amende Acceptance and approval must be made by the District inspector or his authorized representative before backfilling and final connection is to the main sewer lines. Any violation of applicable regulations with cause all lines and appurtenances in violation to be removed and regat the owners expense.  The Fall Creek Regional Waste District is responsible for the approval of materials, and installation techniques only. All costs materials and installation and any liabilities resulting from same is sole responsibility of the property owner.  I have read and fully understand the above provisions and agreed comply by said provisions.  APPLICANT(S) SIGNATURE  INSPECTOR Basement Yes  No  Sump Pump Yes  No  Downspout to Ground Yes  No  Septic Tank Pumped s filled Yes  No  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Ye  |                          |
| Application is hereby made for connection to the Fall Creek Rec Waste District Sewer System for the above listed property - Permit Residential Commercial Industrial or Government Institutional User Information  All workmanship and materials shall conform to the standards of District Ordinance as described in Ordinance 84-2 and 84-3 as amende Acceptance and approval must be made by the District inspector or his authorized representative before backfilling and final connection is to the main sever lines. Any violation of applicable regulations wicause all lines and appurtenances in violation to be removed and regat the owners expense.  The Fall Creek Regional Waste District is responsible for the approval of materials, and installation techniques only. All costs materials and installation and any liabilities resulting from same is sole responsibility of the property owner.  I have read and fully understand the above provisions and agree comply by said provisions.  APPLICANT(S) SIGNATURE  INSPECTOR Parameter Rejected  Notes: Size Pipe Use Paperoved Rejected  Notes: Size Pipe Use Paperoved Rejected  Notes: Size Pipe Description  Date reinspected Approved Rejected  Notes: Size Pipe Description  Date reinspected Research to Ground Yes No Sump Pump Yes No Downspout to Ground Yes No Septic Tank Pumped s filled Yes No   | nest                     |
| Waste District Sewer System for the above listed property - Permit Residential   |                          |
| District Ordinance as described in Ordinance 84-2 and 84-3 as amende Acceptance and approval must be made by the District inspector or in authorized representative before backfilling and final connection is to the main sewer lines. Any violation of applicable regulations with cause all lines and appurtenances in violation to be removed and repart the owners expense.  The Fall Creek Regional Waste District is responsible for the approval of materials, and installation techniques only. All costs materials and installation and any liabilities resulting from same is sole responsibility of the property owner.  I have read and fully understand the above provisions and agree comply by said provisions.  APPLICANT(S) SIGNATURE  INSPECTOR Approved  Reason for rejection  Date reinspected  Approved  Approved  Rejected  Notes:  Size Pipe  Type Pipe  Type Pipe  Downspout to Ground Yes No Sump Pump Yes No Sump Pump Yes No Septic Tank Pumped s filled Yes No Septic Tank Pumped s filled Yes No Special Conditions  Existing Home  Existing Home  | Type:                    |
| approval of materials, and installation techniques only. All costs materials and installation and any liabilities resulting from same is sole responsibility of the property owner.  I have read and fully understand the above provisions and agree comply by said provisions.  APPLICANT(S) SIGNATURE  INSPECTOR Rejected  Reason for rejection  Date inspected Approved Rejected  Notes: Size Pipe W C  Basement Yes X No Sump Pump Yes No Septic Tank Pumped s filled Yes No Special Conditions  Existing Home X   | ed.<br>is duly<br>s made |
| Date inspected   | for is the               |
| Date inspected 495 Approved Rejected  Reason for rejection  Date reinspected Approved Rejected  Notes: Size Pipe W Basement Yes X No Sump Pump Yes No Downspout to Ground Yes No Septic Tank Pumped & filled Yes No Special Conditions  Existing Home X  |                          |
| Date reinspected   |                          |
| Date reinspected   |                          |
| Date reinspected   |                          |
| Notes: Size Pipe  Type Pipe  Type Pipe  W  Basement Yes X No  Sump Pump Yes No  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No  Contractor  Special Conditions  Existing Home  W  Existing Home  |                          |
| Notes: Size Pipe  Type Pipe  Type Pipe  W  Basement Yes X No  Sump Pump Yes No  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No  Contractor  Special Conditions  Existing Home  W  Existing Home  |                          |
| Type Pipe  |                          |
| Basement Yes X No  Sump Pump Yes No  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No  Contractor Self  Special Conditions  Existing Home  |                          |
| Sump Pump Yes No X  Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No X  Contractor Self  Special Conditions  Existing Home   |                          |
| Downspout to Ground Yes No  Septic Tank Pumped & filled Yes No  Contractor Self  Special Conditions  Existing Home   |                          |
| Septic Tank Pumped & filled Yes No X  Contractor Self  Special Conditions  Existing Home   | 1                        |
| Special Conditions  Existing Home  |                          |
| Special Conditions  Existing Home  | Ò                        |
| Existing Home ¥  |                          |
|  | 101                      |
| Note Construction  |                          |
| New Construction   |                          |
|  |                          |



## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

7-15793.03

|        | APPLICATIO  | ON FOR SEWER PERMIT   | Nº 001631  |  |  |
|--------|---|---|--|--|--|
|        | Permit No.  | Date 2  | -3-88  |  |  |
|        | Permit Void 90 days from Date of  |   | 9 0  |  |  |
|        |   | RD Huff   | m 0 1 1  |  |  |
|        | Property Address 5/7 L  |   |  |  |  |
|        |   | P.O. Box  |  |  |  |
|        | Marin (Prilate 1)   | TN Gi- 0-1-   | 46064  |  |  |
|        | Phone 778-3753  | Water Meter   | Pand   |  |  |
|        |   | Paid Ricon  |  |  |  |
|        | \$Inspection  | n fee paid  |  |  |  |
|        | Application is hereby made Waste District Sewer System for Residential, Commercial User In  | the above listed p  | roperty - Permit Type:<br>, or Governmental/   |  |  |
|        | All workmanship and materi<br>District Ordinance as described<br>Acceptance and approval must be<br>authorized representative befor<br>to the main sewer lines. Any v<br>cause all lines and appurtenance<br>at the owners expense. | in Ordinance 84-2<br>made by the Distri<br>e backfilling and f<br>violation of applica        | and 84-3 as amended. ct inspector or his duly inal connection is made ble regulations will |  |  |
|        | The Fall Creek Regional Wa<br>approval of materials, and inst<br>materials and installation and<br>sole responsibility of the prop  | allation techniques<br>any liabilities res  |  |  |  |
|        |   | I have read and fully understand the above provisions and agree to comply by said provisions. |  |  |  |
|        |   | erstand the above pr  | ovisions and agree to  |  |  |
|        | comply by said provisions.  | erstand the above pr  | ovisions and agree to  |  |  |
|        | comply by said provisions.  |   |  |  |  |
|        | APPLICA   | NT(S) SIGNATURE   | ******   |  |  |
|        | APPLICA   | NT(S) SIGNATURE  ***********************************  | ******   |  |  |
|        | APPLICA ************************************  | NT(S) SIGNATURE<br>************************************                                       | **************************************   |  |  |
|        | APPLICA   | NT(S) SIGNATURE<br>************************************                                       | **************************************   |  |  |
|        | APPLICA ************************************  | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA  ************  Date inspected Appro  Reason for rejection  Date reinspected  Notes:   | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA  *************************  Date inspected Appro Reason for rejection  Date reinspected  Notes: Size Pipe "   | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA  **************  Date inspected Appro  Reason for rejection  Date reinspected  Notes: Size Pipe "  Type Pipe "  | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA ****************************  Date inspected Appro Reason for rejection  Date reinspected Notes: Size Pipe "  Type Pipe "  Basement Yes No  | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA  **************  Date inspected Appro  Reason for rejection  Date reinspected  Notes: Size Pipe "  Type Pipe "  | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA ****************************  Date inspected Appro Reason for rejection  Date reinspected Notes: Size Pipe "  Type Pipe "  Basement Yes No  | NT(S) SIGNATURE  ********** INSPECTOR  oved   | **************************************   |  |  |
|        | APPLICA  *******************************  Date inspected Appro Reason for rejection  Date reinspected Notes: Size Pipe "  Type Pipe Basement Yes No Sump Pump Yes No  | ANT(S) SIGNATURE  **********  INSPECTOR  oved  Approved                                       | **************************************   |  |  |
|        | APPLICA  ******************************  Date inspected Appro Reason for rejection  Date reinspected "  Type Pipe "  Type Pipe Basement Yes No  Sump Pump Yes No  Downspout to Ground Yes No  | ANT(S) SIGNATURE  *****************  INSPECTOR  oved  Approved                                | **************************************   |  |  |
|        | APPLICA  ***********************************  | ANT(S) SIGNATURE  ********** INSPECTOR  oved  Approved  No                                    | **************************************   |  |  |
|        | APPLICA  ***********************************  | ANT(S) SIGNATURE  ********** INSPECTOR  oved  Approved  No                                    | **************************************   |  |  |
|        | APPLICA  ***********************************  | ANT(S) SIGNATURE  ********** INSPECTOR  oved  Approved  No                                    | **************************************   |  |  |
|        | APPLICA  ***********************************  | ANT(S) SIGNATURE  ***************  INSPECTOR  Oved  Approved  No                              | **************************************   |  |  |
| W      | APPLICA  ***********************************  | ANT(S) SIGNATURE  ***************  INSPECTOR  Oved  Approved  No                              | **************************************   |  |  |
| W.     | APPLICA  ***********************************  | ANT(S) SIGNATURE  ***************  INSPECTOR  Oved  Approved  No  No  Loxe.                   | **************************************   |  |  |
| u to h | APPLICA  ***********************************  | ANT(S) SIGNATURE  ***************  INSPECTOR  Oved  Approved  No  No  Loxe.                   | **************************************   |  |  |