	2-0012500.00
	Nº 000972
APPLICATIO	ON FOR SEWER PERMIT
Permit No.	Date Dec. 13, 1985
Permit Void 90 days from Date of	of Issuance
Owner Name Kours	ydorshman,
Property Address _523	Sall Creek Phile
Lot #	P.O. Box
Town anderson	, IN Zip Code -46013
phone 649-6749	Water Meter
5 1.50.00 Tap on Fee	e Paid
2820	n fee paid
	e for connection to the Fall Creek Regional r the above listed property - Permit Type:
Residential, Commercial	, Industrial, or Governmental/
Institutional User In	nformation*
	ials shall conform to the standards of the
	d in Ordinance 84-2 and 84-3 as amended. e made by the District inspector or his duly
authorized representative befor	re backfilling and final connection is made
	violation of applicable regulations will ces in violation to be removed and replaced
at the owners expense. The Fall Creek Regional Wa approval of materials, and inst	aste District is responsible for the inspection, tallation techniques only. All costs for any liabilities resulting from same is the
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