C R W

CLEAN
TOMORROW
TODAY!
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## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-007900 50 Nº 000765

Permit No.

Date //-22-85

Permit Void 90 days from Date of Issuance

Owner Name // ERNIE // Drive

Lot # P.O. Box

Town ANDETSON, IN Zip Code 460/3

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/

Inspection fee paid

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.

APPLICA	NT(S) SIGNATURE	
	**************************************	**********
Date inspected \$2 -11-86 Approved Rejected		Rejected
Reason for rejection		
Date reinspected	Approved	Rejected
Notes:		
Size Pipe		
Type Pipe PUC		
Basement Yes No Y		
Sump Pump Yes No X		

Downspout to Ground Yes No
Septic Tank Pumped & filled Yes No
Contractor

Special Conditions

