

## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1 2-0007920.00

APPLICATION FOR	SEWER PERMIT Nº 000757
Permit No.	Date //-23-85
Permit Void 90 days from Date of Iss	uance
Owner Name Runk K.	Don Coly
Property Address 533 Cam	ie Hu ale.
Lot #	P.O. Box
Town anderson,	IN Zip Code 46013
Phone 443-1846	Water Meter
\$ 5000 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.	
R. 127	
APPLICANT(S) SIGNATURE	
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	CTOR TIM
Date inspected 12-27-35 Approved	X Rejected
Reason for rejection	
Date reinspected	Approved Rejected
Notes: 6'	<b>*</b>
Type Pipe PVC	North
Basement Yes No X	
Sump Pump Yes No	Reconnected
Downspout to Ground Yes No	3/1/07

Rev. 11/8

Septic Tank Pumped & filled Yes No

Contractor SELF
Special Conditions

ФC.O.