

21-03538.00



FALL CREEK REGIONAL WASTE DISTRICT

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

Nº 2737

APPLICATION FOR SEWER PERMIT

Date March 9, 2000

Permit Void 90 days from Date of Issuance

Owner Name Steve M. Capua

Property Address 5509 W. Reformatory Rd.

Lot # _____ P.O. Box _____

Town Fortville, IN Zip Code 46046

Phone (765) 778-1629 City Water _____ Well X

\$ 2885.00 Tap on Fee Paid

\$ _____ 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.

Steve M. Capua
APPLICANT(S) SIGNATURE

INSPECTOR Ber

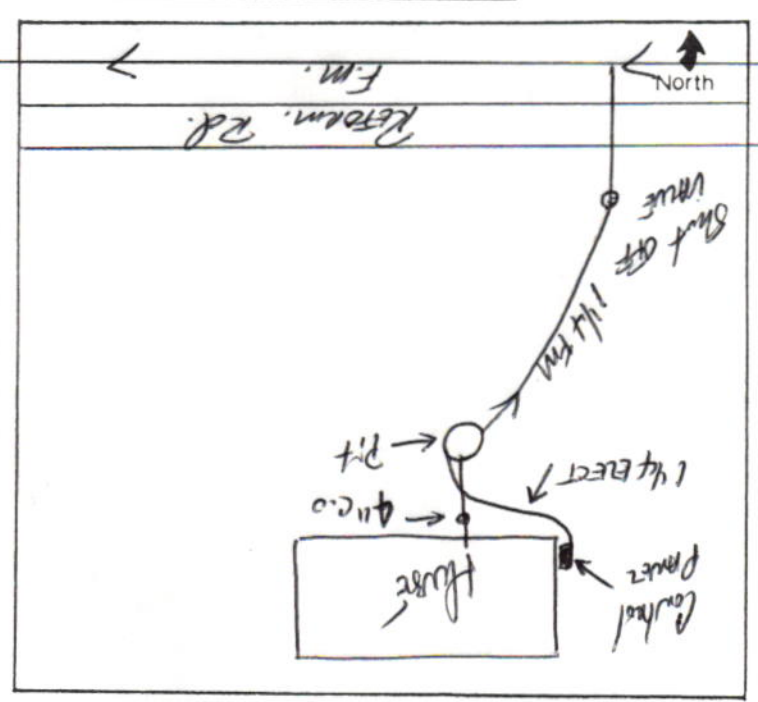
Date inspected 3-8-00 Approved ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:
Size Pipe 4" LAT | 1 1/4" FM
Type Pipe SDR35 | 160 PSI
Basement Yes _____ No ☒
Sump Pump Yes _____ No ☒
Downspout to Ground Yes ☒ No _____
Septic Tank Pumped & filled Yes MR No _____
Contractor M3M Exc.
Special Conditions _____

Existing Home _____
New Construction ☒



Lien Waiver

Receipt and Waiver of Mechanic's Lien Rights

Customer STEVE CAPUADate 3-13-00The undersigned hereby acknowledges receipt of the sum of \$ 2005.⁰⁰

I, the undersigned, for and on behalf of the designated corporation, partnership, individual, hereby acknowledge full payment for any and all work or materials furnished in the construction or repair to the certain structure or improvement located upon the following described property.

Property Address: 5509 W. Reformatory RoadCity/State/Zip: Fortville, In 46040

Type of work completed for this waiver:

☐ Foundation ☐ Well ☐ Septic ☐ Excavating
☐ Basement ☒ Other (please specify hook up fee)
(please check correct one(s))

and heroby state that any claim that I may have has been fully satisfied and paid. I further certify, warrant and guarantee that I, nor anyone working for me on my behalf, has not, and will not file any lien against the above described property.

Fall Creek Regional Waste District
(Company Name - Please Print)

X [Signature]
(Company Representative's Signature)

J. F. Rowlett
(Company Representative's Name - Please Print)

NOTE: If this instrument is executed by a corporation, it must be signed by an officer, and if executed by a partnership it must be signed by a partner.

Subscribed and sworn to before me the undersigned, a notary public, in and for the county and state aforesaid, this 13 day of March, ~~1999~~ 2000

County MadisonX [Signature]

Notary Public

My commission expires 2/20/2008