

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-04900.00

2-0004900

7-000 7100
APPLICATION FOR SEWER PERMIT Nº 001094
Permit No. Date 400 30 1985
Owner Name Owner Ow
Property Address RR 4 Box 1917 Rose Jarmo
Lot #P.O. Box
Town Lond Octon, IN Zip Code 460004
Phone 778-4064 Water Meter "
\$ 50. On Fee Paid
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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
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. APPLICANT(S) SIGNATURE

INSPECTOR Dec
Date inspected 11-31-85 Approved Rejected
Reason for rejection
Date reinspected Approved Rejected
Notes: Size Pipe Type Pipe PUC North
Basement Yes No X
Sump Pump Yes No X
Downspout to Ground Yes No
Septic Tank Pumped & filled Yes No
Contractor CANNE
Special Conditions

Rev. 11/84

P49