Fall Creek Regional Waste District 9378 S 650 W, P.O. Box 59, Pendleton, IN 46064 765-778-7544

Agreement for Sanitary Sewer Service

This Agreement made and entered into this Regional Waste District ("District") and	gnment of capa	is ("	'Applicant") regarding the
Street Address: Woloo Woodchi	2		
Now therefore, the parties, in consideration receipt and sufficiency of which is hereby acknown	of the mutual wledged, agree	promises set out e as follows:	t in this Agreement, the
 The Applicant agrees that all workmansh and the District's construction standards before backfilling and final connection is provision will cause all lines and appurte Applicant's expense. The District shall have the right to enter inspect, repair, or replace any equipment has an impact on said service. The Applicant shall be responsible for al failure to pay any rate charge or fee may termination of service to the property, the but not limited to, all attorney's fees and The District shall not be responsible for a unless said damages are due to default, n If there is an available sanitary sewer with property owner shall be required to connect the property and the terms of the heirs, executors, administrators, personal designees, and transferees. The parties hereto have read and fully undersprovisions. 	s. District must is made to the senances in violation upon the Applit used in connect which is collection cost any damages as neglect or culpation three hundred to the District provision of senis Agreement I I representative stand the above	accept and appropered accept and appropered accept and appropered accept acceptance acce	ove all work and materials y violation of this oved and replaced at the stat all reasonable times to district's service or which charges, and tap fees. The perty and/or the by Applicant, including, failure to supply service to the District. If the property line, the wer system. Ervice touches and tand Applicant and their gents, attorneys, assigns,
FALL CREEK REGIONAL WASTE DISTRICT	Γ	APPLICANT	?
Signature	_	Signature	
STATE OF INDIANA)) SS: COUNTY OF MADISON)			
SUBSCRIBED and sworn to before me this	day of	, 20)
My Commission Expires:			
	Printed		
***********	No	otary Public	
Inspector Date Inspected	Approved	Rejected	d
Reason for Rejecton	Annroyed	Rejected	
Notes:	_ Approved	nejecteu	
Size Pipe Type Pipe	Ĭ.		
Basement <u>Yes No</u>			North
Sump Pump <u>Yes No</u>			
Downspout to Ground Yes No			
Septic Tank Pumped & Filled <u>Yes</u> No			
Contractor		original	permit lost
Special Conditions Existing Home			•
New Construction	1		
TVCW Construction			
nnected in 1996 (?)			

RECEIPT
FALL CREEK REGIONAL WASTE DISTRICT

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COPY

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OTHER INFORMATIO	ED ON COMPUTER N:		,	
************* ACCOUNT NUMBER CUSTOMER NAME SS#(S)		OMED IN	CODE OWNER PHONE NO:	2
SERVICE ADDRESS	: 6060 Woode Pendleton	huck Dr.	lot 73	(
MAILING ADDRESS	:			
IN DATE CALCULATIONS MONTH ADDED	11/16/96	97		
OTHER INFO	:			
	succeiving a	mail as	of 8/25/90	6