## FALL CREEK REGIONAL WASTE DISTRICT

9378 S 650 WEST, P.O. BOX 59, PENDLETON, IN 46064 765-778-7544

## AGREEMENT FOR SANITARY SEWER SERVICE

**NOW THEREFORE**, the parties, in consideration of the mutual promises set out in this Agreement, the receipt and sufficiency of which is hereby acknowledged, agree as follows:

- 1. The Applicant agrees that all workmanship and materials shall conform to all District ordinances and the District's construction standards. District must accept and approve all work and materials before backfilling and final connection is made to the sewer mains this provision will cause all lines and appurtenances in violation to be removed and rep
- 2. The Distrinspect, repair, or replaservice.

n the Applicant's premises at all reasonable times to on with the District's service or which has an impact on said

3. The Appli The failure to pay any r property, the cost of wh

SPECIAL CONDITIONS

**NEW CONSTRUCTION** 

**EXISTING HOME** 

6-11-01

- nthly user rates, capacity charges, and tap fees.

  n against the property and/or the termination of service to the

  pricant, including, but not limited to, all attorney's fees and collection costs.
- 4. The District shall not be responsible for any damages as a result of any failure to supply service unless said damages are due to default, neglect or culpability on the part of the District.
- 5. If there is an available sanitary sewer within three hundred (300) feet of the property line, the property owner shall be required to connect to the District's sanitary sewer system.
- 6. The Applicant and District agree that the provision of sanitary sewer service touches and concerns the property and the terms of this Agreement bind the District and Applicant and their heirs, executors, administrators, personal representatives, successors, agents, attorneys, assigns, designees, and transferees.

The parties hereto have read and fully understand the above provisions and agree to comply with said provisions.

Series Productions		
FALL CREEK REGIONAL WASTE DISTRICT	APPLICANT	
Signature	Signature	
STATE OF INDIANA ) ) SS: COUNTY OF MADISON)		
SUBSCRIBED and sworn to before me this	day of, 200	
My Commission Expires: Signa	nature	
Printe	Notary Public Resident of Madison County	
INSPECTOR 3 DATE INSPECTED6-12	APPROVED REJECTED REJECTED	***
REASON FOR REJECTION		
DATE REINSPECTED	APPROVED REJECTED	
NOTES: C TYPE PIPE 26	G G	
BASEMENT YES NO	-50	uou.
SUMP PUMP YES NO	~	
DOWNSPOUT TO GROUND YES X NO		
SEPTIC TANK PUMPED & FILLED YES / NO		
CONTRACTOR GERGY		