add order



## FALL CREEK REGIONAL WASTE DISTRICT

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

	№ 2330
APPLICATION FOR SEWE	R PERMIT
Date	12/8/95
Permit Void 90 days from Date of Issuance	
Owner Name Worald Zalokar	
Property Address 6141 5 Fox Court Red Fox Road	
Lot # 87 4 88 P.O.	Box
Town Pendleton, IN	Zip Code 46064
Phone	y Water Well/_
\$ 700.00 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	
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 previsions.	
APPLICANT(S) SIGNA	ATURE
*********************	*********
INSPECTOR	
Date inspected Approved	
Reason for rejection	
Date reinspectedAppr	roved Rejected
Notes:	
Size Pipe	North
Type Pipe	
Basement Yes No	
Sump Pump Yes No	
Downspout to Ground Yes No	see attached
Septic Tank Pumped & filled Yes No	
Contractor	
Special Conditions	
Existing Home	
New Construction	

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Nº 2330 APPLICATION FOR SEWER PERMIT Date \_\_\_\_\_12/8/95 Permit Void 90 days from Date of Issuance Owner Name Novald Zalokar

Property Address 6141 5 FOX COURT Lot # 87 4 88 P.O. Box \_\_\_ TOWN Pendleton , IN Zip Code 46064 Phone 778-7719 City Water\_\_\_\_ Well\_ \$ 700.00 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 by said provisions. M APPLICANT(S) SIGNATURE INSPECTORIIM Date inspected 5-396 Approved \_\_\_\_\_ Rejected \_\_\_\_ Reason for rejection \_\_\_\_ Date reinspected Approved Rejected Notes: Size Pipe Type Pipe Basement Yes No 8 Sump Pump Yes X No Downspout to Ground Yes 🖔 No Septic Tank Pumped & filled Yes No  $\times$ Contractor BAken Special Conditions Existing Home New Construction 🔀