22-39965.00 5594 Nº

FALL CREEK REGIONAL WASTE DISTRICT

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

AGREEMENT FOR SANITA	ARY SEWER SERVICE	
This Agreement made and entered into this day of		
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. Any violation of this provision will cause all lines and appurtenances in violation to be removed and replaced at the Applicant's expense.		
The District shall have the right to enter upon the inspect, repair, or replace any equipment used in connection with service.		
3. The Applicant shall be responsible for all monthly user rates, capacity charges, and tap fees. The failure to pay any rate charge or fee may result in a lien against the property and/or the termination of service to the property, the cost of which will be borne by Applicant, 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.		
FAIL CHEEK REGIONAL WASTE DISTRICT	APPLICANT Bulling & By Nam R Pull	
Signature	ignature //	
STATE OF INDIANA)) SS:		
COUNTY OF MADISON)	O	
SUBSCRIBED and sworn to before me this 4 day of 400 5.		
My Commission Expires: Signature	Delacab / Wilson	
Printed _	Notary Public	
Resident of Madison County		
NAME DISPECTED // CAL		
INSPECTOR LOS DATE INSPECTED 10-15-05	APPROVED REJECTED	
	APPROVED REJECTED	
REASON FOR REJECTION	APPROVED REJECTED	
REASON FOR REJECTION		
REASON FOR REJECTION		
NOTES: 6 TYPE PIPE PL35	APPROVED REJECTED	
NOTES: 6 TYPE PIPE PL35 BASEMENT YES NO		
NOTES: 6 TYPE PIPE PC35 BASEMENT YES NO SUMP PUMP YES NO	APPROVED REJECTED	
NOTES: 6 TYPE PIPE PLB BASEMENT YES NO SUMP PUMP YES NO DOWNSPOUT TO GROUND YES NO	APPROVED REJECTED	

EXISTING HOME_

NEW CONSTRUCTION____

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