TRICT 4432 146064 E DL-D4470.00

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. Any violation of this provision will cause all lines and appurtenances in violation to be removed and replaced at the Applicant's expense.
- 2. The District shall have the right to enter upon the Applicant's premises at all reasonable times to inspect, repair, or replace any equipment used in connection with the District's service or which has an impact on said service.
- 3. The Applicant shall be responsible for all m The failure to pay any rate charge or fee may result in a property, the cost of which will be borne by Applicant, i
- The District shall not be responsible for a unless said damages are due to default, neglect or culp

DOWNSPOUT TO GROUND YES X NO

CONTRACTOR

SPECIAL CONDITIONS

NEW CONSTRUCTION

EXISTING HOME

SEPTIC TANK PUMPED & FILLED YES X NO

said provisions.

5. If there is an available sanitary sewer within three property owner shall be required to connect to the District's sanitary sewer system.

and tap fees.
ermination of service to the
ney's fees and collection costs.

to supply service

6. The Applicant and District agree that the provision of sanitary sewer service touches and

property line, the

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

concerns the property and the terms of this Agreement bind the District and Applicant and their heirs, executors,

APPLICANT FALL CREEK REGIONAL WASTE DISTRICT Signature Signature STATE OF INDIANA COUNTY OF MADISON) SUBSCRIBED and sworn to before me this _____ day of ______, 200___. My Commission Expires: Signature Printed Notary Public Resident of Madison County INSPECTOR B DATE INSPECTED 6-13-1 APPROVED REASON FOR REJECTION DATE REINSPECTED APPROVED REJECTED NOTES: TYPE PIPE 26 SIZE PIPE NO X BASEMENT YES NO Y SUMP PUMP YES

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A REJECTION_				-
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