R/W CLEAN TOMORROW TODAY!  $\mathbf{D}$  FALL CREEK REGIONAL WASTE DISTRICT
9378 S. 650 West PO Box 59
Pendleton, IN 46064-0059 778-7544

add order

APPLICATION FOR SE	WER PERMIT Nº 2835				
Date 05JL00					
Permit Void 90 days from Date of Issuance					
Owner Name R. ANTHONY S					
Property Address 6413 INDER					
Tot # 3	BOY N/A				
TOWN PEROLETON IN	7 in Code 4/ DC4				
Lot # 3 P.0  Town PENOLETON , IN  Phone 765-778-8375 C	ity Water Well				
\$_2556.00 Tap on Fee Paid					
\$ <del>Inspection fee pai</del>	4				
Waste District Sewer System for the abo Residential, Commercial, In Institutional User Informatio	dustrial, or Governmental/				
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 provisions					
APPLICANT(S) SIGNATURE					
INSPECTOR					
Date inspected 7-6-00 Approved	Rejected				
Reason for rejection	Rejected				
Date reinspected A	pproved Rejected				
Notes: /	pproved Rejected				
Size Pipe	\$ 60 Ca				
Type Pipe WC 35	North North				
Basement Yes No	41-45				
Sump Pump Yes No	4"				
Downspout to Ground Yes No	145				
Septic Tank Pumped & filled Yes No	6413				
Contractor memicks					
Special Conditions	600				
	V 0. 7.0				
Existing Home					
New Construction					
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## Fall Creek Regional Waste District

9378 S. CR 650 W. P.O. Box 59 Pendleton, IN 46064

Phone: 765-778-7544

Fax: 765-778-7545

				/N\	OICE —
	— Customer—————				
Name Address	Anthony Soverns 6413 S Independence Court	Acct #		Р	Project Area # D W.O. # 9915
City Phone	Pendleton State	IN Zip	46064		Due Date 90 days
QTY	DESCRI	IPTION		UNIT PRICE	TOTAL
1	tap fee	110.5	$\overline{}$	\$400.00	\$400.00
1	capacity fee			\$2,156.00	\$2,156.00
				Sub-Tota	al \$2,556.00
DATE	PAYM	FNT		CHECK NUMBER	AMOUNT
	+		$\overline{}$	OHEOR HOME.	ANIOUNI
				Sub-Tota	al \$0.00
			-		·
	Dı	etach bottom portion and retur	n with navmen	TOTA	L \$2,556.00
	— Cut here	taun bottom poraci, c	II will paymon.	t	
	– Customer				
Name	Anthony Soverns	Acct#		Project Area	
Address City	Pendleton State I	IN Zip	46064	W.O. Due Dat	# 9915 te 90 days
Phone	·		0	Amount Du	\$2,556,00

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