



FALL CREEK REGIONAL WASTE DISTRICT

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

8-18462.00

add order
on file

APPLICATION FOR SEWER PERMIT

Nº 2367

Date 5-7-96

Permit Void 90 days from Date of Issuance

Owner Name Emery B. Cox

Property Address 644 W. Pendleton Avenue

Lot # _____

P.O. Box _____

Town Pendleton

IN Zip Code 46064

Phone 778-3879

City Water _____

Well ☒

\$ 400

Tap on Fee Paid + 1900 capacity fee

\$ _____

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 comply by said provisions.

Emery B. Cox

APPLICANT(S) SIGNATURE

INSPECTOR TIM

Date inspected 9-10-96

Approved ☒

Rejected _____

Reason for rejection _____

Date reinspected _____

Approved _____

Rejected _____

Notes:

Size Pipe 6"

Type Pipe SDR35

Basement Yes ☒ No _____

Sump Pump Yes ☒ No _____

Downspout to Ground Yes ☒ No _____

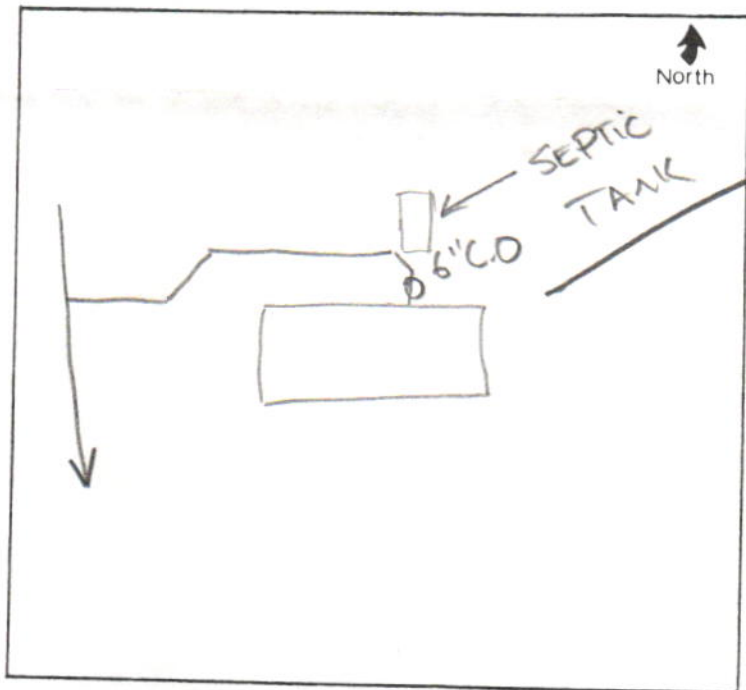
Septic Tank Pumped & filled Yes ☒ No _____

Contractor Flatford & Sons

Special Conditions _____

Existing Home ☒

New Construction _____



Garage
Fall Creek Regional Waste District
9378 S 650 W, P.O. Box 59, Pendleton, IN 46064
765-778-7544

#7423

Agreement for Sanitary Sewer Service

This Agreement made and entered into this 10 day of Feb, 2021, between Fall Creek Regional Waste District ("District") and Herbert Jannin ("Applicant") regarding the provision of sanitary sewer service, and the assignment of capacity in and connection to, the District's facilities for the premises located at _____.

Street Address: 1244 N. Pendleton Ave - connected to house

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 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.

FALL CREEK REGIONAL WASTE DISTRICT
Debra Langer
Signature

APPLICANT

Signature

STATE OF INDIANA)
) SS:
COUNTY OF MADISON)

SUBSCRIBED and sworn to before me this ____ day of _____, 20__

My Commission Expires: _____ Signature _____

Printed _____
Notary Public
Resident of _____ County

Inspector Tim Date Inspected 2-10-21 Approved ☒ Rejected _____
Reason for Rejection _____

Date Reinspected _____ Approved _____ Rejected _____

Notes:
Size Pipe 6" Type Pipe SDR 35
Basement Yes ☐ No ☒
Sump Pump Yes ☐ No ☒
Downspout to Ground Yes ☒ No ☐
Septic Tank Pumped & Filled Yes ☒ No ☐
Contractor TYLER FOSTER

Special Conditions FALLS PARK NORTH 40
Existing Home ☒ New Construction ☐

The Garage Drains To The
NORTH 40 L/S
Per Don myer

