Permit Void 90 days from Date of Issuance Owner Name <u>Mickey Alford</u> Property Address <u>6539 5 Spring Street</u> Lot #P.O. Box Town <u>Perd lefor</u> , IN Zip Code <u>4606 9</u> PhoneCity Water Well \$NATap on Fee Paid \$MAInspection 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 sever lines. Any violation of applicable regulations will cause all lines and appurtenances in violation to be removed and replaced at the owners expense.	9378 S. 650 West PD Box 59         Pendleton, IN 46064-0059 778-7544         Nº 2632         APPLICATION FOR SEWER PERMIT         Date _/0/1/93         Imit Void 90 days from Date of Issuance         mer Name	$\mathbb{R}$			23-02020.0
F(THORN)       9378 S. 650 West PO Box 59 Pendleton, IN 46064-DD59 778-7544         Nº 2633         APPLICATION FOR SEMER PERMIT         Nº 2633         Date //1/198         Permit Void 90 days from Date of Issuance         Owner Name ///1/198         Permit Void 90 days from Date of Issuance         Owner Name ///1/198         Permit Void 90 days from Date of Issuance         Owner Name ///1/198         Point Spring Street         Lot #         Point Spring Street         Non Fee Paid         Synthesize District Sever System for the above listed property - Permit Type:         Mate District Sever System for the above listed property - Permit Type:         Net Fold Edox         Mass to ass described by Othe District inspector or his day         Application is breeby made for connection to the standards of the         Application and approval must be made by the District inspector or his day         Approval Mass Prove Deschilling and final connection is made         Instruct colspan= 64-3         Application and any Libbilities resulting from same is the	9378 S. 650 West PD Box 59         Pendleton, IN 46064-0059 778-7544         Nº 2632         APPLICATION FOR SEWER PERMIT         Date _/0/1/93         Imit Void 90 days from Date of Issuance         mer Name	$C \sim W$	LI CREEK REGI	IONAL WAST	F DISTRICT
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Owner Name       Mickey       Albord         Property Address       6539       5       5         Lot #       Property Address       Property Code       Prove         Town       Pendethan       IN zip Code       1404         Phone       City Water       Well       1         \$	mer Name <u>Mickey Alford</u> roperty Address <u>6539 5 Spring Street</u> por <u>Perdleton</u> , IN zip code <u>4604</u> Tap on Fee Faid <u>Add</u> Tap on Fee Faid <u>Add</u> Inspection fee paid Application is hereby made for connection to the Fall Creek Regional stee District Sewer System for the above listed property - Permit Type: stictutional Commercial, Industrial, or Governmental/ isticutional Commercial, Industrial, or Governmental/ sterior Ordinance as described in Ordinance 84-2 and 84-3 as amended. ropertance and approval must be made by the District inspector on his duly thorized representative before backfilling and final connection is made to the owners expense. The Fall Creek Regional Waste District is responsible for the inspection, proval of materials, and installation techniques only. All costs for tertails and installation and yilabilities resulting from same is the lite responsibility of the property owner. I have read and fully understand the above provisions and agree to mply by slid provisions. <u>AppFICANT(S) SIGNATURE</u> te inspected <u>10-15-78</u> Approved <u>Rejected</u> ason for rejection ter reinspected <u>Approved Rejected</u> tes pipe <u>K</u> " pe Pipe <u>RUZ 35</u> sement Yes <u>NoX</u> mp Pump Yes <u>NoX</u> mp Pump Yes <u>NoX</u> proved filled Yes X No price Tank Pumped s filled Yes X No the filled Yes X No the filled Yes X No the fill X Sover X No th		I	Date 10/7/	98
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Application is hereby made for connection to the Fall Creek Regional         Waste District Sever System for the above listed property - Permit Type:         Residential	Application is hereby made for connection to the Fall Creek Regional iste District Sewer System for the above listed property - Permit Type: sidential, Commercial, Industrial, or Governmental/         Astrict Sewer System for the above listed property - Permit Type: sidential, Commercial, Industrial, or Governmental/         Astrict Sewer System for the above listed property - Permit Type: sidential, commercial, Industrial, or Governmental/         Astrict Sewer System for the above listed property - Permit Type: sidential, commercial, Industrial, or Governmental/         Astrict Sewer System for the above listed property - Permit Type: sidential	sN/A	Tap on Fee Paid		
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I have read and fully understand the above provisions and agree to comply by said provisions. MANY APPLICANT(S) SIGNATURE INSPECTOR Date inspected 10-15-28 Approved	I have read and fully understand the above provisions and agree to mply by said provisions. Main a analysis approved approved approved	materials and insta sole responsibility	illation and any live of the property of	iabilities result	ing from same is the
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