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

Agreement for Sanitary Sewer Service

This Agreement made and entered into this \(\frac{1}{2} \) day of \(\frac{1}{2} \) day of \(\frac{1}{2} \) between Fall Creek Regional Waste District ("District") and \(\frac{1}{2} \) for \(\frac{1}{2} \) ("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 \(\frac{1}{2} \) ("Applicant") regarding the
Street Address: Lesles Laurel wood Dr. Pendicton, IN Medicy
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:
 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 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. 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. 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. 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. 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.
Signature Signature APPLICANT Signature
STATE OF INDIANA)
10 Ole on Management of the Control
) SS: COUNTY OF MADISON)
COUNTY OF MADISON)
SUBSCRIBED and sworn to before me this day of Dec., 20 K My Commission Expires: OFFICIAL SEAL RACHEL ELAINE ANDERSON NOTARY PUBLIC-STATE OF INDIANA MADISON COUNTY MY COMM. EXPIRES OCTOBER 23, 2021 Resident of Wad. St. County
SUBSCRIBED and sworn to before me this day of day o
SUBSCRIBED and sworn to before me this day of Dec., 20 8 My Commission Expires: OFFICIAL SEAL RACHEL ELAINE ANDERSON NOTARY PUBLIC-STATE OF INDIANA MADISON COUNTY MY COMM. EXPIRES OCTOBER 23, 2021 Printed Cachel C. Ayder Son Notary Public Resident of Wadisu County Rejected Date Inspected 4 10-19 Approved Rejected Notes: Size Pipe 6 Type Pipe 50 235 Basement Yes Sump Pump Yes North
SUBSCRIBED and sworn to before me this day of
SUBSCRIBED and sworn to before me this day of
SUBSCRIBED and sworn to before me this day of 20 8 M Commission Expires: OFFICIAL SEAL RACHEL ELAINE ANDERSON NOTARY PUBLIC STATE OF INDIANA MADISON COUNTY MY COMM. EXPIRES OCTOBER 23, 2021 Inspector Date Inspected 10-19 Date Reinspected Approved Rejected Date Reinspected Approved Rejected Notes: Size Pipe Type Pipe DD 35 Basement Yes (No Downspout to Ground Yes No Septic Tank Pumped & Filled Yes (No Septic Tank Pumpe





