#6879

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 Regional Waste District ("District") and Arbor Hoprovision of sanitary sewer service, and the assign facilities for the premises located at Maple Train	omes	9	("Appli	icant") regarding the
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Now therefore, the parties, in consideration of receipt and sufficiency of which is hereby acknown				is Agreement, the
 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 provisions.	and the above	provisions	and agree	e to comply with said
FALL CREEK REGIONAL WASTE DISTRICT Signature		APPLIC Signature	27R (vatson
STATE OF INDIANA) SS: COUNTY OF MADISON)	,	отрими.	C	
SUBSCRIBED and sworn to before me this _	day of		_, 20	
My Commission Expires:	Signature			
		tary Public		County
······································	Not Res	sident of	*****	County *******
nspector Kyle Date Inspected 6/3/20	Not Res ***********************************	sident of *********************************	******* ected	
Date Reinspected Notes:	Not Res ***********************************	sident of *********************************	******* ected	
Date Reinspected Notes: Size Pipe Pipe Pipe 35 Basement Yes No Sump Pump Yes No Downspout to Ground Yes No	Not Res ***********************************	sident of *********************************	******* ected	
Notes: Type Pipe SPF 35 Basement Yes No Sump Pump Yes No	Not Res ***********************************	sident of *********************************	******* ected	

Lot CS Maple Trails 6607 Lourelmoof Dr





