#6865

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 3 day of 4, between the Regional Waste District ("District") and Arbor Homes ("Application of sanitary sewer service, and the assignment of capacity in and connection facilities for the premises located at Maple Trails Lot 51	cant") regarding the
Street Address: 6680 Mayaple DR	
Now therefore, the parties, in consideration of the mutual promises set out in thi receipt and sufficiency of which is hereby acknowledged, agree as follows:	s Agreement, the
 The Applicant agrees that all workmanship and materials shall conform to all and the District's construction standards. District must accept and approve all before backfilling and final connection is made to the sewer mains. Any violal provision will cause all lines and appurtenances in violation to be removed an Applicant's expense. The District shall have the right to enter upon the Applicant's premises at all inspect, repair, or replace any equipment used in connection with the District has an impact on said service. The Applicant shall be responsible for all monthly user rates, capacity charge failure to pay any rate charge or fee may result in a lien against the property attermination of service to the property, the cost of which will be borne by Apple 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 unless said damages are due to default, neglect or culpability on the part of the If there is an available sanitary sewer within three hundred (300) feet of the peroperty owner shall be required to connect to the District's sanitary sewer service to concerns the property and the terms of this Agreement bind the District and A heirs, executors, administrators, personal representatives, successors, agents, designees, and transferees. 	I work and materials ation of this and replaced at the reasonable times to a service or which as, and tap fees. The and/or the alicant, including, to supply service to supply
The parties hereto have read and fully understand the above provisions and agree provisions.	to comply with said
FALL CREEK REGIONAL WASTE DISTRICT APPLICANT.	A
FALL CREEK REGIONAL WASTE DISTRICT Signature Signature APPLICANT Signature	akson
Signature Signat	akson
Signature Signature Signature State of Indiana) SS: COUNTY OF MADISON)	akson
Signature	akson
Signature	akson
Signature Subscribed and sworn to before me this 30 day of 40 da	County
Signature Subscribed and sworn to before me this 30 day of 40 da	County
Signature Printed Notary Public Resident of ***********************************	County *******
Signature Approved Rejected Notary Public Resident of ***********************************	County *******
Signature Approved Rejected	County *******
Signature Approved Rejected Notary Public Resident of Reason for Rejecton Date Inspected Approved Rejected Notes: Size Pipe Type Pipe SDR 3 S Basement Yes No Sump Pump Yes No	County *******
Signature Approved Rejected Reason for Rejecton Date Reinspected Notes: Signature Printed Notary Public Resident of Rejected Reason for Rejecton Date Reinspected Approved Rejected Notes: Size Pipe Type Pipe No Sump Pump Yes No Downspout to Ground Yes No Sump Commission Signature Printed Rejected Rejected Rejected Rejected Rejected No Sump Pump Yes No Downspout to Ground Yes No	County *********
Signature Approved Resident of Rejected Reason for Rejecton Date Reinspected Approved Rejected Notes: Size Pipe Type Pipe SNO Sump Pump Yes NO Sump Pump Yes NO Septic Tank Pumped & Filled Yes NO Contractor No Contractor No Signature Printed Notary Public Resident of Rejected Notary Rejected No Septic Tank Pumped & Filled Yes No Contractor No Contractor No Signature Printed Notary Public Resident of Rejected No Rejected Date Reinspected No Sump Pump Yes No Contractor No Contractor No Signature No No No Signature Printed Notary Public Resident of No Rejected No Septic Tank Pumped & Filled Yes No Contractor No Signature	County *********
Signature My Commission Expires: Signature Printed Notary Public Resident of ***********************************	County *********
Signature Approved Resident of Notary Public Resident of Resident of Reason for Rejecton Date Reinspected Approved Rejected Notes: Size Pipe Type Pipe SDC 3 S Basement Yes No Source Septic Tank Pumped & Filled Yes Special Conditions Special Conditions	County *********

6680 Mayapple Dr. Maple Trails Lot # 51

6680 Mayapple Maple Trails Lot 51 Kyle Cravens 9/23/2019

