



# FALL CREEK REGIONAL WASTE DISTRICT

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

26-00050.00

add order  
on file

## APPLICATION FOR SEWER PERMIT

Nº 2749

Date APRIL 7, 2000

Permit Void 90 days from Date of Issuance

Owner Name JOHN L. SPORINSKY

Property Address 6740 S. 600 W.

Lot # \_\_\_\_\_ P.O. Box \_\_\_\_\_

Town PENDLETON, IN Zip Code 46064

Phone 778-2741

City Water \_\_\_\_\_ Well ☒

\$ 2227.80 Tap on Fee Paid

grinder unit \$1024.80

\$ \_\_\_\_\_ 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.

John L. Sporinsky

APPLICANT(S) SIGNATURE

INSPECTOR B

Date inspected 6-6-00 Approved ☒ Rejected \_\_\_\_\_

Reason for rejection \_\_\_\_\_

Date reinspected \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Notes:

Size Pipe 4"

Type Pipe PVC

Basement Yes ☒ No \_\_\_\_\_

Sump Pump Yes \_\_\_\_\_ No ☒

Downspout to Ground Yes ☒ No \_\_\_\_\_

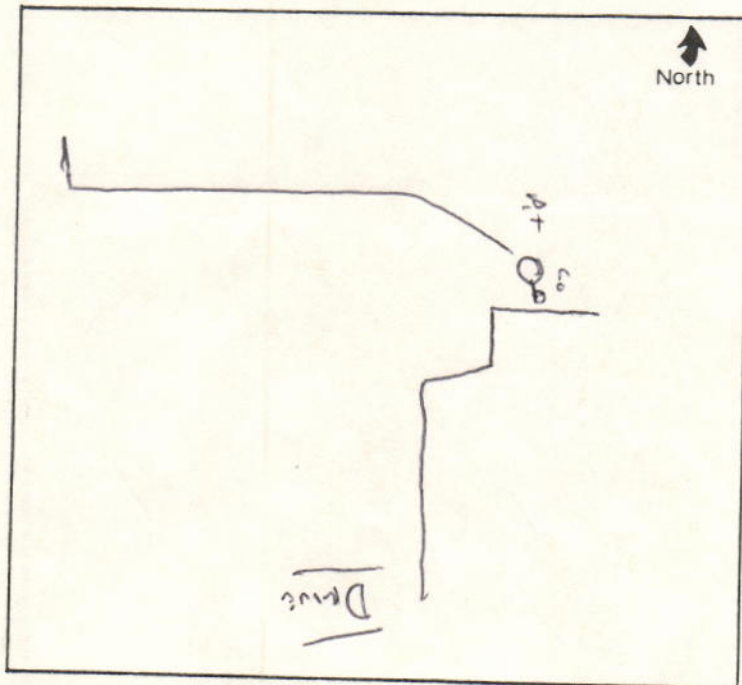
Septic Tank Pumped & filled Yes ☒ No \_\_\_\_\_

Contractor TEDS - Fisher

Special Conditions \_\_\_\_\_

Existing Home ☒

New Construction \_\_\_\_\_



9378 S. CR 650 W.  
P.O. Box 59  
Pendleton, IN 46064  
Phone: 765-778-7544

**INVOICE****Customer:**

Name	John Sporinsky	Acct #	26-00050.00
Address	6740 S 600 W		
City	Pendleton	State	IN Zip 46064
Phone			

Project Area #	D
W.O. #	9915
Due Date	90 days

QTY	DESCRIPTION	UNIT PRICE	TOTAL
1	tap fee	\$400.00	\$400.00
1	capacity fee	\$2,156.00	\$2,156.00
		Sub-Total	\$2,556.00

<b>DATE</b>	<b>PAYMENT</b>	<b>CHECK NUMBER</b>	<b>AMOUNT</b>
	payment of interim bill		\$328.20
		<b>Sub-Total</b>	<b>\$328.20</b>

<b>TOTAL</b>	<b>\$2,227.80</b>
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*Detach bottom portion and return with payment*

**Cut here**

**Customer:**

Name John Sporinsky Acct # 26-00050.00  
Address 6740 S 600 W  
City Pendleton State IN Zip 46064  
Phone \_\_\_\_\_

Project Area #	D
W.O. #	9915
Due Date	90 days

<b>Amount Due</b>	<b>\$2,227.80</b>
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## DAILY SUMMARY

CMD7-END

Account No 260005000 SPORINSKY, JOHN 6740 S 600 W

Sel	Date	Tran Type	Total	Waste Wtr	Penalty
	3/25/99	BILLING	27.35	27.35	
	3/29/99	PAYMENT	27.35	27.35	
	4/26/99	BILLING	27.35	27.35	
	5/11/99	PAYMENT	27.35	27.35	
	5/26/99	BILLING	27.35	27.35	
	6/04/99	PAYMENT	27.35	27.35	
	6/25/99	BILLING	27.35	27.35	
	7/12/99	PAYMENT	27.35	27.35	
	7/26/99	BILLING	27.35	27.35	
	8/04/99	PAYMENT	27.35	27.35	
	8/27/99	BILLING	27.35	27.35	
	9/07/99	PAYMENT	27.35	27.35	
	9/24/99	BILLING	27.35	27.35	
	10/25/99	BILLING	54.70	54.70	
	11/15/99	PAYMENT	54.70	54.70	

*Ypd 3-25-99 3-25-99*

## DAILY SUMMARY

CMD7-END

Account No 260005000 SPORINSKY, JOHN 6740 S 600 W

Sel	Date	Tran Type	Total	Waste Wtr	Penalty
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	11/24/99	BILLING	27.35	27.35	
	11/30/99	PAYMENT	27.35	27.35	
	12/23/99	BILLING	27.35	27.35	
	12/29/99	PAYMENT	27.35	27.35	
	1/24/00	BILLING	27.35	27.35	
	2/15/00	PAYMENT	27.35	27.35	
	2/25/00	BILLING	27.35	27.35	
	3/02/00	PAYMENT	27.35	27.35	
	3/24/00	BILLING	27.35	27.35	