



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-0010980.00

Your permit no. is 635  
please call and give us  
No 000635

APPLICATION FOR SEWER PERMIT

Permit No. \_\_\_\_\_ Date Nov. 15, 1985 your permit no. when your ready for insp.  
Permit Void 90 days from Date of Issuance.  
Owner Name Albert C. Wilson  
Property Address 690.5 Hendricks  
Lot # \_\_\_\_\_ P.O. Box \_\_\_\_\_  
Town Anderson, IN Zip Code 46013  
Phone 649-1318 Water Meter \_\_\_\_\_  
\$ 150.00 Tap on Fee Paid  
\$ \_\_\_\_\_ 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.

X \_\_\_\_\_  
APPLICANT(S) SIGNATURE

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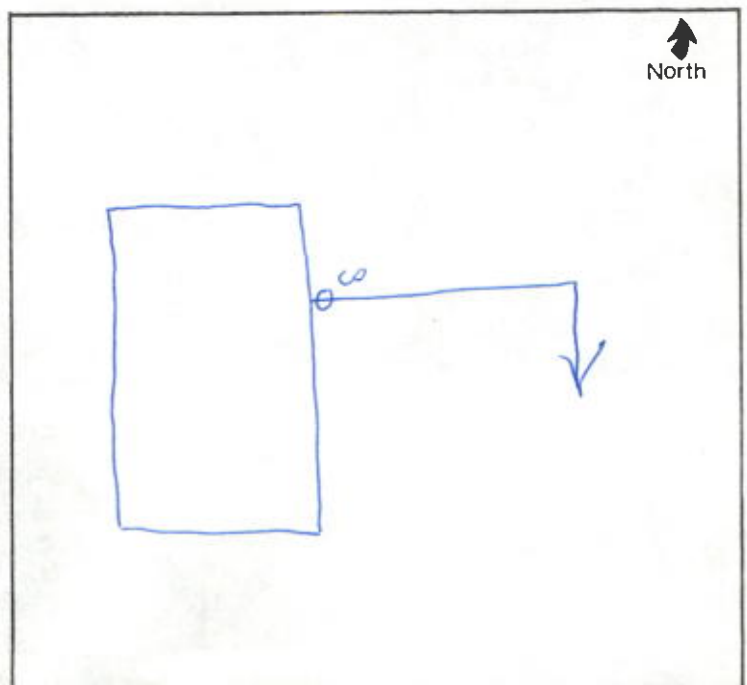
INSPECTOR BEN

Date inspected 12-3-85 Approved ☒ Rejected \_\_\_\_\_

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

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

Notes:  
Size Pipe 6 "  
Type Pipe PVC  
Basement Yes \_\_\_\_\_ No ☒  
Sump Pump Yes \_\_\_\_\_ No ☒  
Downspout to Ground Yes ☒ No \_\_\_\_\_  
Septic Tank Pumped & filled Yes ☒ No \_\_\_\_\_  
Contractor FLATFORD & SON  
Special Conditions \_\_\_\_\_



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FALL CREEK REGIONAL WASTE DISTRICT  
Box 44, Pendleton, Indiana 46064

2-03-023000  
Please call and give us  
your permit No. 1235

Permit No. 1235

Permit Valid to day 12/15/85

Owner Name Robert C. Johnson

Property Address 6095 Xenium

Lot # 1

City Indianapolis

Phone 419-1318

Water Meter 40013

Inspection fee paid 25.00

Tap on fee paid 150.00

Application is hereby made for connection to the Fall Creek Regional Waste District Sewer System for the above listed property - Permit Year: 1985

Residential ☒ Commercial ☐ Industrial ☐ Other ☐

All workmanship and materials shall conform to the standards of the District Ordinance as described in Ordinances 84-3 and 84-4 as amended. Acceptance and approval must be made by the District Inspector on site and 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 owner's 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 all labor fees 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.

[Signature]  
PROPERTY OWNER SIGNATURE

[Signature]  
DISTRICT INSPECTOR

Date Inspected 12-3-85 Approved ☒ Rejected ☐

Reason for rejection

Date reinspected

Notes:

Size Pipe 6"

Type Pipe PVC

Based on Yes ☒ No ☐

Septic Tank Pump Yes ☒ No ☐

Downspout to Ground Yes ☒ No ☐

Septic Tank Pumped & Filled Yes ☒ No ☐

Comments Flatford & Son

Special Conditions

