



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-00/2360.00

No 001297

APPLICATION FOR SEWER PERMIT

Permit No. _____ Date Feb. 3, 1986

Permit Void 90 days from Date of Issuance

Owner Name Ronald Davis

Property Address 6908 Delaware

Lot # _____ P.O. Box _____

Town Anderson, IN Zip Code 46013

Phone 644-0347 Water Meter _____

\$ 15000 Tap on Fee Paid

\$ 2800 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 X, 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.

[Handwritten signature]

APPLICANT(S) SIGNATURE

INSPECTOR

[Handwritten signature: Randy]

Date inspected 5-19-86 Approved [checked] Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes: Size Pipe 6" Type Pipe PVC Basement Yes NoX Sump Pump Yes NoX Downspout to Ground YesX No Septic Tank Pumped & filled Yes NoX Contractor Passmore Special Conditions owner will take care of

