

FALL CREEK REGIONAL WASTE DISTRICT

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

Nº 2753 APPLICATION FOR SEWER PERMIT Date 4-13-00 Permit Void 90 days from Date of Issuance Owner Name Relph & Property Address 69955 600W Lot # P.O. Box _, IN Zip Code _ 46064 TOWN Pendleton Phone 765- 718-3265 City Water_ Well 2556.00 Tap on Fee Paidod. 5/4/00 gunder unit_1024.80 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. APPLICANT(S) SIGNATURE INSPECTOR DOW Date inspected 5 Approved / Reason for rejection Date reinspected Approved Rejected Size Pipe Type Pipe WC35 Basement Yes Sump Pump Yes Downspout to Ground Yes Septic Tark Pumped & filled Vest Contractor MATTERSON Special Conditions Existing Home /

New Construction

MR. & MRS. RALPH E. GINDER 1-68 6995 \$ 600 W PENDLETON, IN 46064

DATE 5-4-00

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Madison Community Bank

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