

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1-0000240.00

APPLIC	ATION FOR SEWER PERMIT	Nº 000963
Permit No.	Date XLC /	2,1985
Permit Void 90 days from Da	te of Issuance	
Owner Name	U & Cross	
Property Address 700	Joxes St.	
Lot #	P.O. Box	
Town sagells	, IN Zip Code	16048
Phone	Water Meter	11
\$	Fee Paid	
\$ Inspec	tion fee paid	
Waste District Sewer System Residential		erty - Permit Type:
All workmanship and ma District Ordinance as descr Acceptance and approval mus authorized representative b to the main sewer lines. A cause all lines and appurte at the owners expense.	t be made by the District i efore backfilling and final ny violation of applicable	84-3 as amended. nspector or his duly connection is made regulations will
approval of materials, and materials and installation sole responsibility of the	and any liabilities resulti	ly. All costs for ing from same is the
APF	LICANT(S) SIGNATURE	
**********	INSPECTOR Kon	
Date inspected 1-24-86 A		ected
Reason for rejection	bbrosed	
icason for rejection		
Date reinspected	Approved	Rejected
Notes: Size Pipe		North
Type Pipe PVC		C.O. North
Basement Yes No		
Sump Pump Yes No		
Downspout to Ground Yes XN	0	
Septic Tank Pumped & filled	Yes X No	
Contractor Luce Ru	lu	
Special Conditions		
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	Note that all supplies at the