

## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2-0008480.00

Nº 000191

APPLICATION FOR SEWER PERMIT	14. 000131
Permit No. Date 9-23-8	?5
Permit Void 90 days from Date of Issuance	
Owner Name Maura C. Colvell	
Property Address 7130 Ydendricks	
Lot # P.O. Box	
Town In Zip Code 460	013
Phone 643-385 Water Meter	
\$ 150 °° Tap on Fee Paid	
\$ 25 Inspection fee paid	
Application is hereby made for connection to the Fall C Waste District Sewer System for the above listed property - Residential, Commercial, Industrial, or Go Institutional User Information	Permit Type: vernmental/
All workmanship and materials shall conform to the stand District Ordinance as described in Ordinance 84-2 and 84-3 at Acceptance and approval must be made by the District inspect authorized representative before backfilling and final connect to the main sewer lines. Any violation of applicable regular cause all lines and appurtenances in violation to be removed at the owners expense.	s amended. or or his duly ction is made tions will
The Fall Creek Regional Waste District is responsible approval of materials, and installation techniques only. As materials and installation and any liabilities resulting from sole responsibility of the property owner.	ll costs for
I have read and fully understand the above provisions a comply by said provisions.  ***********************************	all
Date inspected 17-12-6 Approved Rejected	
Reason for rejection	
	100
Date reinspected Approved Rejection	eted
	North
Septic Tank Pumped & filled Yes X No  Contractor A S A  Special Conditions	
84	60

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