



FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

1-000056.00

No 001486

APPLICATION FOR SEWER PERMIT

Permit No. \_\_\_\_\_ Date 4-14-86

Permit Void 90 days from Date of Issuance

Owner Name Wendell R. Johnson

Property Address 720 1/2 East St

Lot # \_\_\_\_\_ P.O. Box \_\_\_\_\_

Town Ingalls, IN Zip Code 46048

Phone 485-4959 Water Meter \_\_\_\_\_

\$ 150.00 Tap on Fee Paid 75.00 pd 4-14-86

\$ 25.00 Inspection fee paid 100.00 pd 6-9-86

Application is hereby made for connection to the Fall Creek Regional Waste District Sewer System for the above listed property - Permit Type: Residential [checked], Commercial \_\_\_\_\_, Industrial \_\_\_\_\_, or Governmental/Institutional \_\_\_\_\_.

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.

+ Wendell R. Johnson APPLICANT(S) SIGNATURE

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INSPECTOR [Signature]

Date inspected 6-10-86 Approved [checked] Rejected \_\_\_\_\_

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

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

Notes: Size Pipe 6" Type Pipe PVC Basement Yes No [checked] Sump Pump Yes No [checked] Downspout to Ground Yes [checked] No Septic Tank Pumped & filled Yes No [checked] Contractor Cozart Special Conditions Owner will TAKE CARE OF SEPTIC



