0		V
F	CLEAN TOMORROW TODAY!	D

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-00/00.01

P24

A	PPLICATION FOR SEWER PERMIT	Nº 000430
Permit No.	Date	0-85
Permit Void 90 days fr	om Date of Issuance	
Owner Name Pa	ula Wade	
Property Address R	4, Box 9	7210 5 Woodrow Dr.
Lot #	P.O. Box	
TOWN TENDLETON	V , IN Zip Code 460	064
Phone 317-778	- 7/82 Water Meter	
\$ <u>/50°0</u> T	ap on Fee Paid	
\$15°°	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 _____, 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

X Paula R Wade APPLICANT (S) SI	IGNATURE	
**************************************	or Ben	
Date reinspected A	Approved Rejected	
Notes: Size Pipe		North