

FALL CREEK REGIONAL WASTE DISTRICT

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Box 44, Pendleton, Indiana 46064

2	-00/9940.00
APPLICATION FOR SEWER PERMI	Nº 00141
Permit No Date	arch 17, 1986
Permit Void 90 days from Date of Issuance	
Owner Name James addusor	
Property Address 7316 Sprage	Q
Lot # P.O. Box	
Town analyser, IN Zip Cod	= 44013
Phone 694-4566 Water Meter	·
\$ Tap on Fee Paid	
\$ <u>8500</u> 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 _____.

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.

APPL	ICANT(S) SIGNATURE	2	
**************************************		Rejected	
Date reinspected	Approved	Rejected	
Notes: Size Pipe <u>6</u> " Type Pipe <u>PUC</u> Basement Yes No K			North
Sump Pump Yes No \times Downspout to Ground Yes \times No Septic Tank Pumped & filled Y Contractor $A + A$	Tes X No		
Special Conditions	r	dio	