

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-00480.00

2-0000480.00

Nº 000424

APPLICATION	FOR SEWER PERMIT	
Permit No.	Date 10-28-85	
Permit Void 90 days from Date of	Issuance	
Owner Name CORNELL	BRIGHT	1405 5 Woodww
Property Address R4, Box	28 - PORter Ada	L OL.
Lot #	P.O. Box	
Town PENDLeton	, IN Zip Code 46064	
Phone 778-2050	Water Meter	"
\$ /50 00 Tap on Fee	Paid	
\$ 25 °C Inspection	fee paid	
	Generation to the Fall Cross	k Degional

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/ . User Information 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.

APPLICANT(S) SIGNATURE INSPECTOR Date inspected Approved Rejected Reason for rejection Date reinspected Rejected Approved N S

Notes: Size Pipe	North
Type Pipe T.V.C	
Basement Yes No	
Sump Pump Yes No	
Downspout to Ground Yes No	
Septic Tank Pumped & filled Yes No	
Contractor KARL DAVIS	
Special Conditions TANK WILL Se	
DONC LATER	0
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