add order on file

FALL CREEK REGIONAL WASTE DISTRICT

A CLEAN TOMORROW TODAY!

9378 S. 650 West PO Box 59
Pendleton, IN 46064-0059 778-7544

26-05660.00

№ 2898

APPLICATION FOR SEWER PERMIT

Date 10.27.2000

Permit Void 90 days from Date of Issuance

Owner Name VERA L MARTIN

Property Address 7835 W 1000 S

Lot # – P.O. Box –

Town FORTVILLE, IN Zip Code 46040-9224

Phone 317-485-4454 City Water ____ Well ✓

$ N/A ~~Tap on Fee Paid~~

$ N/A ~~Inspection fee paid~~

One Source Underground
Chuck Mahurin

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.

Vera L Martin
APPLICANT(S) SIGNATURE

****

Date inspected 10-27-00 / 12/8/00 INSPECTOR Jim / Ben Approved ✓ Rejected ____

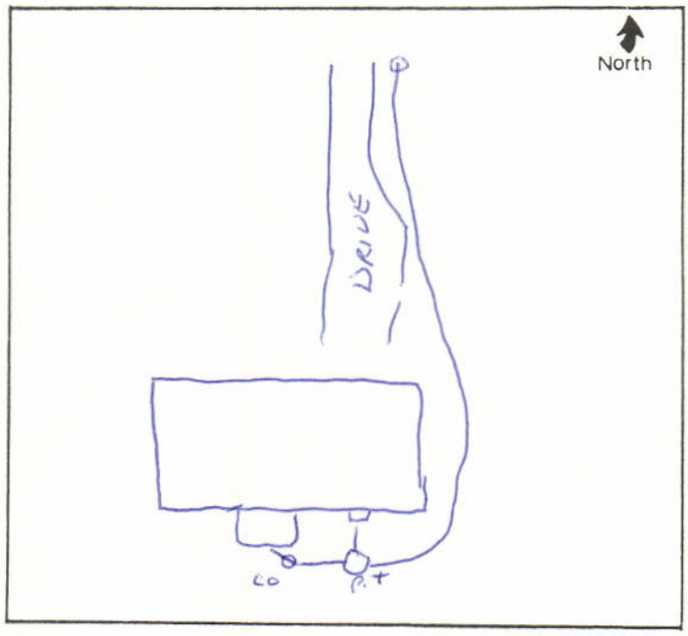
Reason for rejection ____

Date reinspected ____ Approved ____ Rejected ____

Notes:
Size Pipe 4" "
Type Pipe PVC
Basement Yes ____ No X Trickle
Sump Pump Yes ____ No X
Downspout to Ground Yes X No ____
Septic Tank Pumped & filled Yes ____ No X
Contractor One Source
Special Conditions ____

Existing Home X

New Construction ____



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