



FALL CREEK REGIONAL WASTE DISTRICT

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

add order
on file

09-22/42.00

Nº 2348

APPLICATION FOR SEWER PERMIT

Date 3/2/96

Permit Void 90 days from Date of Issuance

Owner Name ALRED Richmond

Property Address GARDEN CT. 805 305 W Reformatory Road

Lot # _____ P.O. Box _____

Town Pendleton, IN Zip Code 46064

Phone _____ City Water _____ Well ☒

\$ 400.00 Tap on Fee Paid 5/8/96

\$ 1900.00 Capacity inspection fee paid 5/8/96

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.

APPLICANT(S) SIGNATURE

INSPECTOR Don

Date inspected 3/1/96 Approved Don ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe 6 "

Type Pipe PVC

Basement Yes _____ No _____

Sump Pump Yes _____ No _____

Downspout to Ground Yes _____ No _____

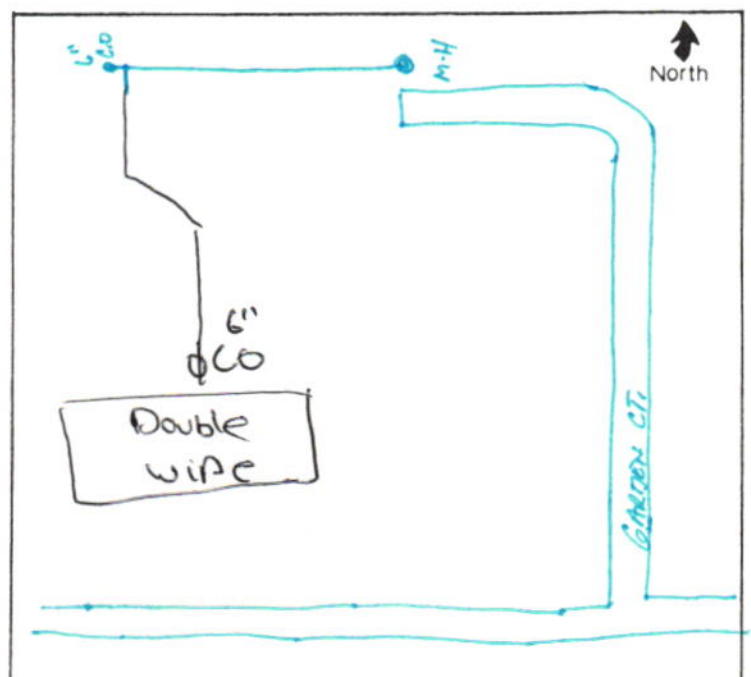
Septic Tank Pumped & filled Yes _____ No _____

Contractor Brian McKinney Const.

Special Conditions _____

Existing Home _____

New Construction ☒



Fall Creek Regional Waste District

9378 S. CR 650 W.
P.O. Box 59
Pendleton, IN 46064
317-778-7544 Fax 317-778-7545

INVOICE

INVOICE NO:
DATE: April 25, 1996

To:

Mr. Alfred Richwine
5603 W. Reformatory Road
Fortville, IN 46040
Re: Garden Court

TERMS
Net 30

QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1	Capacity Fee	\$1,900.00	\$1,900.00
1	Tap Fee	\$ 400.00	\$ 400.00
SUBTOTAL			\$2,300.00
TOTAL DUE			\$2,300.00

Make all checks payable to: Fall Creek Regional Waste District
If you have any questions concerning this invoice, call: Debbie Wilson, 317-778-7544

THANK YOU !