

FALL CREEK REGIONAL WASTE DISTRICT Box 44, Pendleton, Indiana 46064

ODAY!		
	2-0008740.00 P	servet no
APPLICATION FOR SE	Nº 000	
Permit No Date	MON 14 1985	
Permit No Date Permit Void 90 days from Date of Issuance	ice	
Owner Name Charles C. Mil	les 5305 Donne	leg 80
Property Address 803	lock Drive	460
Lot # P.O	. Box	
rown anderson, IN	zip Code 4601)	
Phone 378-3253 Wat	er Meter	
s		
s 05.00 Inspection fee pai	.d	
Application is hereby made for con		
Waste District Sewer System for the abo	ove listed property - Permit Type:	
Residential , Commercial , In Institutional . User Informatio	dustrial, or Governmental/	
All workmanship and materials shal District Ordinance as described in Ordi	nance 84-2 and 84-3 as amended.	
Acceptance and approval must be made by authorized representative before backfi	the District inspector or his dul lling and final connection is made	-Y
to the main sewer lines. Any violation	of applicable regulations will	
cause all lines and appurtenances in vi at the owners expense.	olation to be removed and replaced	
The Fall Creek Regional Waste Dist	trict is responsible for the inspec	ction,
approval of materials, and installation	n techniques only. All costs for	
materials and installation and any liab sole responsibility of the property own		е
I have read and fully understand t	the above provisions and agree to	
comply by said provisions.		
		4
APPLICANT(S) SI		
	3	
Date inspected 1-9-86 Approved	Rejected	
Date reinspected	Approved Rejected	
Notes:		•
Type Pipe Pipe "		North
Basement Yes No X		
Sump Pump Yes No		
Downspout to Ground Yes No		
Septic Tank Pumped & filled Yes No		
Contractor Slack,		
Special Conditions	Library Boy	
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207 25. 627 28	\$C6	
207 25. 627 28	\$C6	
207 25. 627 28	\$C0	