

Fall Creek Regional Waste District
9378 S 650 W, P.O. Box 59, Pendleton, IN 46064
765-778-7544

#6556

Agreement for Sanitary Sewer Service

This Agreement made and entered into this 7 day of March, 2016 between Fall Creek Regional Waste District ("District") and John Perry ("Applicant") regarding the provision of sanitary sewer service, and the assignment of capacity in and connection to, the District's facilities for the premises located at 8406 W 1000 S. Fortville, IN 46040

Now therefore, the parties, in consideration of the mutual promises set out in this Agreement, the receipt and sufficiency of which is hereby acknowledged, agree as follows:

1. The Applicant agrees that all workmanship and materials shall conform to all District ordinances and the District's construction standards. District must accept and approve all work and materials before backfilling and final connection is made to the sewer mains. Any violation of this provision will cause all lines and appurtenances in violation to be removed and replaced at the Applicant's expense.
2. The District shall have the right to enter upon the Applicant's premises at all reasonable times to inspect, repair, or replace any equipment used in connection with the District's service or which has an impact on said service.
3. The Applicant shall be responsible for all monthly user rates, capacity charges, and tap fees. The failure to pay any rate charge or fee may result in a lien against the property and/or the termination of service to the property, the cost of which will be borne by Applicant, including, but not limited to, all attorney's fees and collection costs.
4. The District shall not be responsible for any damages as a result of any failure to supply service unless said damages are due to default, neglect or culpability on the part of the District.
5. If there is an available sanitary sewer within three hundred (300) feet of the property line, the property owner shall be required to connect to the District's sanitary sewer system.
6. The Applicant and District agree that the provision of sanitary sewer service touches and concerns the property and the terms of this Agreement bind the District and Applicant and their heirs, executors, administrators, personal representatives, successors, agents, attorneys, assigns, designees, and transferees.

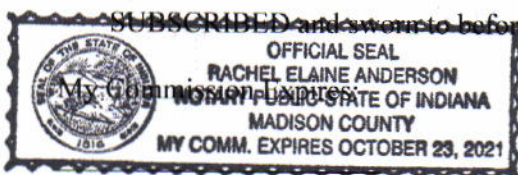
The parties hereto have read and fully understand the above provisions and agree to comply with said provisions.

FALL CREEK REGIONAL WASTE DISTRICT
Rachel E. Anderson
Signature

APPLICANT

Signature John Perry

STATE OF INDIANA)
) SS:
COUNTY OF MADISON)



SUBSCRIBED and sworn to before me this 7 day of March, 2016

Signature

Rachel E. Anderson

Printed

Rachel E. Anderson

Notary Public

Resident of Madison County

Inspector _____ Date Inspected _____ Approved _____ Rejected _____

Reason for Rejection _____
Date Reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe _____ Type Pipe _____

Basement Yes _____ No _____

Sump Pump Yes _____ No _____

Downspout to Ground Yes _____ No _____

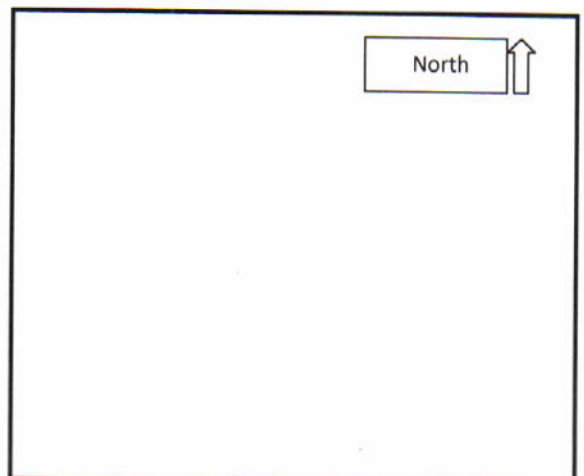
Septic Tank Pumped & Filled Yes _____ No _____

Contractor _____

Special Conditions _____

Existing Home _____

New Construction _____



FALL CREEK REGIONAL WASTE DISTRI
9378 S 650 W
PO BOX 59
PENDLETON, IN 46064
765-778-7544

FALL CREEK REGIONAL WASTE DIST
0005560008022120839000

Date: 03/07/2016 10:22:10 AM

CREDIT CARD SALE

VISA

CARD NUMBER: *****8791 K

TRAN AMOUNT: \$2,800.00

APPROVAL CD: 007505

ECI:

RECORD #: 000

CLERK ID: Rachel

CUST CODE: FLAT

SALES TAX: \$0.00

INVOICE #: 260582500

X


JOHN C PERRY

I AGREE TO PAY THE ABOVE TOTAL AMOUNT
ACCORDING TO THE CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

Thank you for your business!

Merchant Copy

RECEIPT

FALL CREEK REGIONAL WASTE DISTRICT

P.O. BOX 59 CO. RD. 650 WEST

NO. 010444

General FUND

PENDLETON, IN 46064 DATE March 7, 2011

RECEIVED FROM John Perry \$2,800.00

THE SUM OF two thousand - eight hundred 00 100 DOLLARS

ON ACCOUNT OF 8400 W. 1000 S. Fortville, IN 46040 ¹⁰⁰

PAYMENT TYPE AND AMOUNT: Capacity fee

CASH CHECK M.O.

E.F.T. C.C./B.C. 007505 OTHER

Reed Andrew
AUTHORIZED SIGNATURE