## Fall Creek Regional Waste District

9378 S 650 W, P.O. Box 59, Pendleton, IN 46064 765-778-7544

## **Agreement for Sanitary Sewer Service**

This Agreement made and entered into this 30 day of 40, between Fall Creek Regional Waste District ("District") and Arbor Homes ("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 Maple Trails Lot 29

#6850

Street Addre	ss: <u>8409</u> \$	alverbus	b UI	Rendleton	
<b>Now therefore,</b> 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:					
and befo prov	<ol> <li>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.</li> </ol>				
2. The inspe					
3. The failu term but r	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.				
unle: 5. If the prop	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.					
Signature Signature Signature APPLICANT Signature					
STATE OF INDIANA ) ) SS: COUNTY OF MADISON )					
SUBSCRIBED and sworn to before me this 30 day of 400, 20 19					
RACHEL ELAINE ANDERSON		Printed Ro	rinted Rochel E. Andleso  Notary Public Resident of Madis— County		
*********************					
Inspector 6-8-20 Date Inspected John Approved Rejected Rejected					
	Date Reinspected	_ Approved	Rejected		
Notes: Size Pipe	Type Pipe PVC 35				
Basement Ye	s No			North 1	
Sump Pump				North	
and the second s	o Ground <u>Yes No</u> umped & Filled Yes No		~		
	DR WATSON		Drawn	ng	
Special Condi				attached	
Existing Home		1		anaceci	
New Construc	ction		(no Ar	ctures)	
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