F. CLEAN D FALL CREEK REGIONAL WASTE DISTRICT Box 44, Pendleton, Indiana 46064 Jacobarian Jacobarian Jacobarian Jacobarian Jacobarian Jacobarian Jacobarian Jacobarian Jacobarian Nº 000509 APPLICATION FOR SENER PERMIT Nº 000509 Permit No. Date 147-85 Permit Void 90 days from Date of Issuance Owner Name Owner MANA Owner Name TOS Statac749 Jot # Proventy Address DBOY 11/3 Statac749 Jot # Proventy Address DBOY 11/3 Statac749 Jot # Proventy Address Tos 540004 Tos 540004 Jot # Proventy Address Tos 440004 Tos 540004 S	40.00 SR6
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Lot # P.O. Box	
Town Multiplication IN Zip Code 46.064 Phone 778-44.51 Water Meter " \$	
Phone 778-4451 Water Meter " \$	
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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 Or Governmental/ Institutional User Information Or Governmental/ Institutional User Information 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 MADUAL	
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 sever 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 TINSPECTOR Try Date inspected <u>11-B-05</u> Approved X Rejected Date reinspected Approved Rejected	
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comply by said provisions Applicant(S) SIGNATURE ************************************	

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Date reinspected Approved Rejected	
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Notes:	
Size Pipe 6" "	1
Type Pipe PVC	North
Basement Yes No X	
Sump Pump Yes No X	
Downspout to Ground Yes No X	
Septic Tank Pumped & filled Yes NoX	A
Contractor JERRY COX	
Special Conditions	
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