



FALL CREEK REGIONAL WASTE DISTRICT

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

add order
on file

26-06620.00

APPLICATION FOR SEWER PERMIT

Nº 2921

Date 11/6/2000

Permit Void 90 days from Date of Issuance

Owner Name RAY D Smith

Property Address 8578 W old East Rd, Fortville Ind

Lot # 23 P.O. Box _____

Town Green, IN Zip Code 46040

Phone 465 7265 City Water _____ Well ☒

\$ N/A Tap on Fee Paid

\$ N/A Inspection fee paid

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 workman conform to the standards of the District Ordinance 84-2 and 84-3 as amended. Acceptance and the District inspector or his duly authorized representative. When the final connection is made to the main sewer line, all applicable regulations will cause all line installation to be removed and replaced at the owners expense.

Septic TR
No pump
No R/R

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.

X Ray D Smith
APPLICANT(S) SIGNATURE

INSPECTOR Dow

Date inspected 1/01 Approved _____ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes: 6"
Size Pipe _____
Type Pipe DVC 35
Basement Yes _____ No ☒
Sump Pump Yes _____ No ☒
Downspout to Ground Yes ☒ No _____
Septic Tank Pumped & filled Yes _____ No _____
Contractor Harvey Const.
Special Conditions _____

Existing Home ☒

New Construction _____

