add order on file

C/R/W
F A CLEAN TOMORROW TODAY! D

FALL CREEK REGIONAL WASTE DISTRICT
9378 S. 650 West   PO Box 59
Pendleton, IN 46064-0059   778-7544   *22.12535.cc*

APPLICATION FOR SEWER PERMIT   № 2128

Date _9-9-94_

Permit Void 90 days from Date of Issuance

Owner Name _Mustin Builders_   _Jim Weaver_

Property Address _8740 Carriage Lane Fiddler's Green_

Lot # _92_   P.O. Box _____

Town _Pendleton_ , IN Zip Code _46064_

Phone _____   City Water _____ Well _____

$ _700.⁰⁰_ Tap on Fee Paid

$ _25.⁰⁰_ Inspection fee paid _Ck. #14389_

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 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 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.

(per phone)
_____
APPLICANT(S) SIGNATURE

****

INSPECTOR _Don_

Date inspected _____ Approved _✓_ Rejected _____

Reason for rejection _____

Date reinspected _____   Approved _____ Rejected _____

Notes:
Size Pipe _6_ "

Type Pipe _PVC_

Basement Yes _____ No _____

Sump Pump Yes _____ No _____

Downspout to Ground Yes _____ No _____

Septic Tank Pumped & filled Yes _____ No _____

Contractor _Mustin Builders_

Special Conditions _____

Existing Home _____

New Construction _✓_

North