C\R/W

A CLEAN TOMORROW TODAY!

F\ /D

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

26-07060.00

APPLICATION FOR SEWER PERMIT

№ 2991

Date __1-05-01__

Permit Void 90 days from Date of Issuance

Owner Name __Derek Fogle__

Property Address __8777 Old Fort Rd__

Lot # _____   P.O. Box _____

Town __Fortville__ , IN Zip Code __46040__

Phone __317-485-4143__   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 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.

_____
APPLICANT(S) SIGNATURE

****

INSPECTOR __B__

Date inspected __1-5-01__ Approved __✔__ Rejected _____

Reason for rejection _____

_____

Date reinspected _____   Approved _____ Rejected _____

Notes:
Size Pipe __6"__ "

Type Pipe __PVC__

Basement Yes _____ No __X__

Sump Pump Yes _____ No __X__

Downspout to Ground Yes __X__ No _____

Septic Tank Pumped & filled Yes __X__ No _____

Contractor __Sweezy__

Special Conditions _____

Existing Home __X__

New Construction _____

North