

FALL CREEK REGIONAL WASTE DISTRICT

4574

9378 S 650 WEST, P.O. BOX 59, PENDLETON, IN 46064

765-778-7544

AGREEMENT FOR SANITARY SEWER SERVICE

This Agreement made and entered into this 29th day of April, 2002, between FALL CREEK REGIONAL WASTE DISTRICT ("District") and Deborah L. Massey ("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 8794 W 1000S Fortville IN 46040

NOW THEREFORE, 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:

1. 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.
2. The District shall have the right to enter upon the Applicant's premises at all reasonable times to inspect, repair, or replace any equipment used in connection with the District's service or which has an impact on said service.
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.
4. The District shall not be responsible for any damages as a result of any failure to supply service 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.

FALL CREEK REGIONAL WASTE DISTRICT
[Signature]
Signature

APPLICANT
[Signature]
Signature

STATE OF INDIANA)
) SS:
COUNTY OF MADISON)

SUBSCRIBED and sworn to before me this 29th day of April, 2002.

My Commission Expires:
2-20-2008

Signature Deborah L. Wilson

Printed Deborah L. Wilson

Notary Public
Resident of Madison County

INSPECTOR _____ DATE INSPECTED _____ APPROVED _____ REJECTED _____

REASON FOR REJECTION _____

DATE REINSPECTED _____ APPROVED _____ REJECTED _____

NOTES:
SIZE PIPE _____ TYPE PIPE _____

BASEMENT YES _____ NO _____

SUMP PUMP YES _____ NO _____

DOWNSPOUT TO GROUND YES _____ NO _____

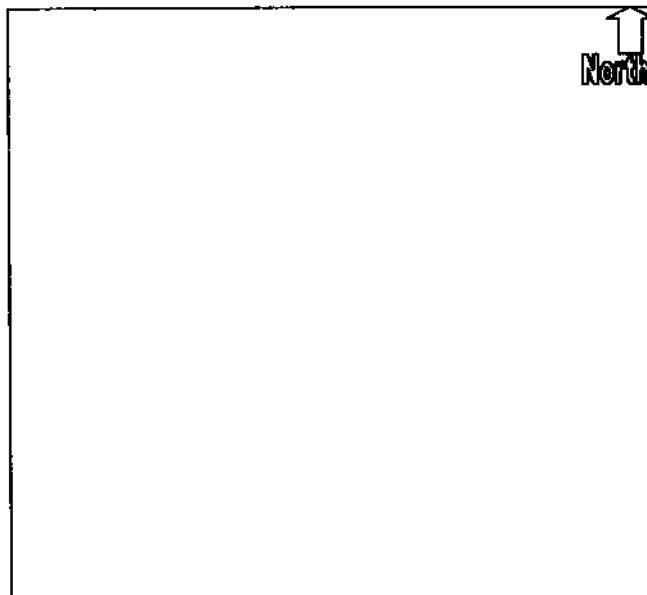
SEPTIC TANK PUMPED & FILLED YES _____ NO _____

CONTRACTOR _____

SPECIAL CONDITIONS _____

EXISTING HOME _____

NEW CONSTRUCTION _____



World Wildlife Fund

John C. Allen
301-562-236

DATE 3/6/03 026

PAY TO THE ORDER OF Fall Creek Regional Waste \$ 84.95

Eighty four and 95/100 DOLLARS

BANK OF AMERICA

26-05990.00

MEMO Husten Allen

©IMAGE CHECKS 2002

1-800-562-8768

www.imagechecks.com

WWF WILD KIDS

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APRIL -
FORK
AWAWARENESS MONTH
JUBILEE STABLE, INC.
8794 W 1000 S

FORTVILLE IN
46040-9241

ACCOUNT NUMBER

26-05990.00

SERVICE ADDRESS

8794 W 1000 S

BILLING DATE 4/25/03

PLEASE RETURN STUB WITH PAYMENT

TOTAL AMOUNT DUE PAST DUE AMOUNT

490.70 494.20

PD 84.95



Jubilee Stables Inc.

Boarding - Lessons - Shows
Saddle Club - Buy - Sell

8794 W 1000 S

Fortville, In. 46040

Ph. #317-485-5259

Russell Jordan

WHILE YOU WERE OUT

TO *Debbie* DATE *11-13-02*

TIME *12:15* ☐ AM ☐ PM

M *Debbie Masser*

OF *Jubilee Stables*

PHONE *317-485-5259*

FAX _____ PAGER _____

MOBILE _____ E-MAIL _____

TELEPHONED <input checked="" type="checkbox"/>	CAME TO SEE YOU <input type="checkbox"/>
PLEASE CALL <input checked="" type="checkbox"/>	WANTS TO SEE YOU <input type="checkbox"/>
WILL CALL AGAIN <input type="checkbox"/>	URGENT <input type="checkbox"/>
RETURNED YOUR CALL <input type="checkbox"/>	WILL FAX YOU <input type="checkbox"/>

MESSAGE _____

Jan OPERATOR

connected 10/21/02
\$ 84.95 a month



CARBONLESS

23-021 200 SETS
23-421 400 SETS