

## FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

2.0000500

Nº 001138

APPLICATION FOR SEWER PERMIT
Permit No Date
Permit Void 90 days from Date of Issuance
Owner Name Steven R. (19RK
Property Address 8796 CARRIAGE LANE
Lot # P.O. Box
TOWN FENDLE for, IN Zip Code 46064
Phone 778-4729 Water Meter "
\$
\$ 25 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.
Allew & Clark
APPLICANT(S) SIGNATURE
***************
INSPECTOR
Date inspected -8 Approved Rejected
Reason for rejection
Date reinspected Approved Rejected
Notes: Size Pipe "
Type Pipe PVC
Basement Yes No X
Sump Pump_Yes No X
Downspout to Ground Yes No
Septic Tank Pumped & filled Yes No.
Contractor A & A
Special Conditions