

FALL CREEK REGIONAL WASTE DISTRICT

2-0003000.00

Box 44, Pendleton, Indiana 46064

APPLICATION FOR	SEWER PERMIT Nº 000508
Permit No.	ate 11-7-85
Permit Void 90 days from Date of Issu	ance
Owner Name David A. L	Vaye
Property Address 8910 SURR	ey DR
Lot #P	.0. Box
TOWN ENDLETON	IN Zip Code 46064
Phone 778-4744 W	ater Meter"
$\frac{5000}{2500}$ Tap on Fee Paid	
\$ Inspection fee p	aid
Application is hereby made for c	connection to the Fall Creek Regional

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.

Date inspected 1-13 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 ADOLSON Special Conditions		North