

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

3-0001420.00

Permit No. Date 1-1-85 Permit Void 90 days from Date of Issuance Owner Name Auglic Hierarch Property Address	APPLICATION FOR SEWE	Nº 000089
Permit Void 30 days from Date of Issuance Owner Name Acolic Accounts Property Address P. P. O. Box Accounts Town N. N. Sip Code Hood - 9543 Phone 778 - 2750 Water Meter " \$		
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Town 778 2750 Water Meter " Tap on Fee Paid Tap on Fee Paid Application is hereby made for connection to the Fall Creek Regional Waste District Sever System for the above listed property - Permit Type: Residential Commercial Institutional User Information 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 Date inspected Approved Rejected Reason for rejection Date reinspected Approved Rejected Notes: Size Pipe "Type Pipe Approved Rejected Notes: Size Pipe "Type Pipe Date Tank Pumped s filled Yes No Septic Tank Pumped s filled Yes No Septic Tank Pumped s filled Yes No Septic Tank Pumped s filled Yes No	Property Address 70 11 2 204	330 701 D. Broadway
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