

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

add order

Nº 2695

	APPLICATION FOR SEWI	ER PERMIT	•	
	Date	8	3-99	
Permit Void 90 days	from Date of Issuance	9		
Owner Name	Brown		*	
Property Address	92 INMAN	Dr.		
Lot # 96	P.O.	Вох		-
TOWN INGAILS	, IN	Zip Code _		
Phone 641-7018	Ci	ty Water_	X Well_	
\$	Tap on Fee Paid			
\$	Laspection fee paid			
Application is I Waste District Sewer Residential K, Co	ommercial , Indu	e listed pro ustrial	perty - Permit	Type:
All workmanship District Ordinance as Acceptance and approvauthorized represents to the main sewer lineause all lines and a at the owners expense	val must be made by the stive before backfill nes. Any violation of appurtenances in viol	ance 84-2 ar the District ling and fir of applicabl	nd 84-3 as amen inspector or nal connection te regulations	ded. his duly is made will
The Fall Creek I approval of materials and install sole responsibility of	lation and any liabi:	techniques (lities resu	only. All cost	s for
I have read and comply by said provis	fully understand the	e above pro	visions and agr	ee to
South	rate Hames	1	12 1	_
0	APPLICANT(S) SIGN	NATURE	a jongas	
***********	************	*******	********	*****
Date inspected $9-1$	INSPECTOR	1500		
Date inspected /-/-	-9 Approved V	Re	ejected	
Reason for rejection				
Date reinspected	App	roved	Rejected	
Notes: Size Pipe				A
Type Pipe PVC				North
Basement Yes No	<u></u>			·
Sump Pump Yes No	7			
Downspout to Ground Y	es X No			1 /
Septic Tank Pumped &				, N (
Contractor Broken				
Special Conditions				
Existing Home				
New Construction	×			