3:30

FALL CREEK REGIONAL WASTE DISTRICT

Box 44, Pendleton, Indiana 46064

22-04540.00

2-000 4540

APPLICATION FOR SEWER PERMIT

№ 000842

Permit No. _____ Date Dec. 2, 1985

Permit Void 90 days from Date of Issuance

Owner Name Steve Super 932 W 575 S

Property Address RR4 Box 220 575S.

Lot # _____ P.O. Box _____

Town Pendleton, IN Zip Code 46064

Phone 778-3418 Water Meter _____"

$ 150.00 Tap on Fee Paid

$ 25.00 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 X, 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.

X Steve Super
APPLICANT(S) SIGNATURE

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INSPECTOR Chris

Date inspected 12-4-85 Approved ✓ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved Rejected

Notes:

Size Pipe 6"

Type Pipe P.V.C.

Basement Yes No ✓

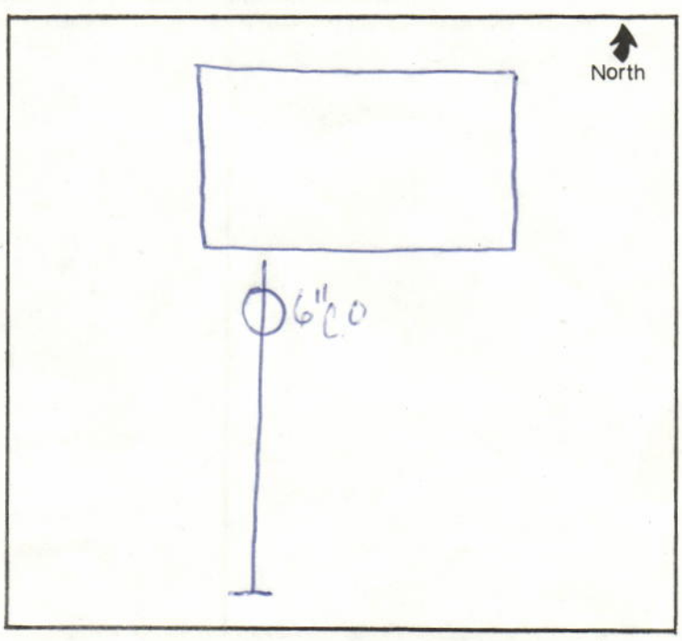
Sump Pump Yes No ✓

Downspout to Ground Yes No ✓

Septic Tank Pumped & filled Yes No ✓

Contractor Crunkle

Special Conditions Owner will take care of tank



Rev. 11/84

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