



FALL CREEK REGIONAL WASTE DISTRICT

9378 S. 650 West PO Box 59
Pendleton, IN 46064-0059 778-7544

APPLICATION FOR SEWER PERMIT

Nº 2530

Date _____

Permit Void 90 days from Date of Issuance

Owner Name Chuck Clwenger

Property Address Falls Park Plaza II

Lot # _____ P.O. Box _____

Town Pendleton, IN Zip Code 46064

Phone _____ City Water ☒ Well _____

\$ _____ Tap on Fee Paid

\$ _____ 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/Institu _____

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11/6/98

Per Jim McCurdy, this
business is on its own meter.

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APPLICANT(S) SIGNATURE

INSPECTOR Bar

Date inspected 7-14-98 Approved ☒ Rejected _____

Reason for rejection _____

Date reinspected _____ Approved _____ Rejected _____

Notes:

Size Pipe 6 "

Type Pipe PVC

Basement Yes _____ No ☒

Sump Pump Yes _____ No ☒

Downspout to Ground Yes ☒ No _____

Septic Tank Pumped & filled Yes _____ No _____

Contractor M&M Exc. Inc.

Special Conditions (Sewer shop)

Existing Home _____

New Construction ☒

