



JERSEY COUNTY HEALTH DEPARTMENT

1307 State Hwy. 109 • Jerseyville Illinois 62052

Date paid _____

Amount paid _____

Check # or cash _____

Received by _____

PERMIT # _____ -2017

Application for Permit to Construct a Private Sewage Disposal System

IMPORTANT: Jersey County Health Department does not guarantee trouble free operation of this sewage treatment system by the issuance of a sewage permit or final approval of the installation. The contractor and/or persons other than the Jersey County Health Department are responsible for proper installation of the sewage treatment and/or disposal system contemplated herein, and for compliance with Jersey County Health Department's Ordinance and other applicable laws. By signing this application the property owner assumes full responsibility for maintenance and record keeping, as outlined in Section 905.20(q) of the Illinois Private Sewage Disposal Licensing Act and Code; and assumes full responsibility for any nuisance or health hazard that might result from the use of the system.

Date _____ New Construction Replacement

Name _____ Phone Number _____

Current Address _____

Site Location Address _____ Lot size/acreage _____

Name of Subdivision (If applicable) _____ Lot # _____

Directions to site _____

Contractor _____ License # _____ Phone Number _____

Contractor Signature _____ Date _____

Site Information

Public Sewer Available: Yes No

Water Supply: Individual well Public Other Describe _____
Distance from septic tank _____ ft. Disposal system _____ ft.

Installation for: Residence Commercial Other Describe _____

Residential: # of Bedrooms _____ Garbage Disposal Hot Tub

Garbage Disposal Basement Water Softener

Commercial: # of Employees _____ Estimated Water Usage GPD _____

SOIL INVESTIGATION: _____ Soil Scientist completing soil investigation GPD/LOADING RATE: _____

System Components

Septic/Aeration Tank: Capacity _____ Concrete Other Approval # _____ Describe _____

Type of System: Seepage field Seepage bed Gravel-less Sand filter Aerobic Unit

Chlorinator Other Describe _____

Total square feet of seepage area _____. Total linear feet of seepage of distribution lines _____.

Effluent Discharge Y____ N____ **Does this system discharge into the "Waters of the United States" as defined in the US Environmental Protection Agency regulations 40 C.F.R. § 122.2? Y__N__**

Number of lines _____ Width of trenches _____ Length of trenches _____

Depth of trenches _____

Type of Materials: Gravel Stone State approved filter media

Depth of material under line (if applicable) _____ inches. Over top of line _____.

Sewer Line Materials: Building to septic tank Cast iron Approved plastic

Septic System Materials: Perforated plastic Field tile Other

By signing below I certify that the attached information is complete and correct and that, if approved, the work will conform with the current Private Sewage Disposal Licensing Act and Code. I understand that obtaining an NPDES permit from the USEPA is required when discharging to Waters of the United States. EPA's regulations at 40 C.F.R. § 122.2 defines Water of the United States. (Attached with application)

Signature of Owner

Date

Permit is hereby granted to construct a sewage disposal system on above described property on the basis of the above information and the layout plan as shown on the reverse side hereof. Deviation from approved application will automatically revoke this permit. This permit void if construction is not started within six months.

Date

Approved By

Layout Sketch

Make sure to include the following information in the diagram:
Water Supply Shown _____ Utilities Shown _____ Distances Labeled _____ Lot Slope (flat, hillside, etc.) _____
Soil Borings _____

