

# MARION COUNTY HEALTH DEPARTMENT

## Private Sewage Disposal System Plan Review Application

☐ New ☐ Replacement ☐ Renovation

PERMIT NUMBER \_\_\_\_\_

1. Owner \_\_\_\_\_ Address \_\_\_\_\_  
Telephone No. \_\_\_\_\_

2. Contractor \_\_\_\_\_ License No. \_\_\_\_\_  
Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

*NOTE: In general, work not done by homeowner must be done by a licensed contractor.*

3. Location – City \_\_\_\_\_ Street \_\_\_\_\_  
Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

4. **Directions to Site:** Road Name, Highway Number, Secondary Roads, Signs to follow, etc.

5. **Site Information:**  
Residential \_\_\_\_\_, Seasonal \_\_\_\_\_; Type of building to be served (house, trailer, business, etc.) \_\_\_\_\_  
No. of Bedrooms \_\_\_\_\_; Basement \_\_\_\_\_; Garbage Grinder \_\_\_\_\_; Water Softener \_\_\_\_\_; Hot Tub \_\_\_\_\_, #gal. \_\_\_\_\_  
Geothermal Well \_\_\_\_\_

Non-Residential \_\_\_\_\_; No. of Employees \_\_\_\_\_; Design Flow \_\_\_\_\_; Other Wastewater Generators \_\_\_\_\_

Water Supply: Private Well \_\_\_\_\_; Cistern \_\_\_\_\_; Semi-Private Well \_\_\_\_\_; Non-Community \_\_\_\_\_; Municipal \_\_\_\_\_

Soil Load Rate: \_\_\_\_\_ gal/ft<sup>2</sup>/day Limiting Layer (depth): \_\_\_\_\_ ft.

**Soil analysis required for all subsurface seepage systems.**

6. **Proposed Private Sewage Disposal System:** Gallons to be Treated Per Day: \_\_\_\_\_ gpd

Septic Tank Size \_\_\_\_\_ gallons; IL # \_\_\_\_\_

Subsurface Seepage Field/Bedroom: \_\_\_\_\_ ft<sup>2</sup>

Total Subsurface Seepage Field: \_\_\_\_\_ ft<sup>2</sup>; Linear ft. \_\_\_\_\_; Width \_\_\_\_\_

Gravelless Seepage Field – 8": \_\_\_\_\_ Linear ft.; 10": \_\_\_\_\_ Linear ft.

Buried/Recirculating Sand Filter: \_\_\_\_\_ ft<sup>2</sup>; Width: \_\_\_\_\_ Length: \_\_\_\_\_

Waste Stabilization Pond (Lagoon): Width: \_\_\_\_\_ Length: \_\_\_\_\_ Depth: \_\_\_\_\_

Aerobic Treatment Plant: \_\_\_\_\_ GPD: \_\_\_\_\_ Treatment Capacity: \_\_\_\_\_

Manufacturer and Model: \_\_\_\_\_

Location of Audio and Visual Alarms: \_\_\_\_\_

Chlorination Tank: \_\_\_\_\_ Gallons

Effluent Discharge to: \_\_\_\_\_

Pump Chamber Size: \_\_\_\_\_

Chamber System: Type \_\_\_\_\_; ft<sup>2</sup> \_\_\_\_\_; No. of Lines \_\_\_\_\_; Length: \_\_\_\_\_; Width: \_\_\_\_\_

Effluent Reduction: Gravel ( ) Graveless ( ) Chamber ( ) Lineal ft: \_\_\_\_\_ Type \_\_\_\_\_

## 7. Lot Diagram and Sewage System Plan:

Furnish plans or draw to scale the proposed construction indicating: lot size with dimension showing the system; type of system to be constructed; the dimensions of the system to be installed showing type of material, utilities, distances to water lines, water wells (including wells on neighboring property if they are near the property line), potable water storage tanks, buildings, lot lines; location of percolation holes; site elevations and ground surface elevation of system components and the slope of the ground surface; location of sanitary sewer (if available within 200 feet of the property); depth of limiting layer and any other extraordinary conditions on the lot.

N  
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1" = \_\_\_\_\_

## 8. Checklist

Lot Size: \_\_\_\_\_  
System Dimensions: \_\_\_\_\_  
Materials Labeled: \_\_\_\_\_  
Utilities Shown: \_\_\_\_\_  
Location of Soil Tests: \_\_\_\_\_  
Water Supply Shown: \_\_\_\_\_  
Required Distances Labeled: \_\_\_\_\_  
Depth of Limiting Layer: \_\_\_\_\_  
Geothermal Well: \_\_\_\_\_

Elevations of the System Components:

Benchmark & Elevation: \_\_\_\_\_  
Elevation to Invert of Building Drain: \_\_\_\_\_  
Elevation to Invert of Tank Inlet: \_\_\_\_\_  
Elevation of Ground Surface over Tank: \_\_\_\_\_  
Lowest Elevation of Ground Surface over Field: \_\_\_\_\_  
Highest Elevation of Ground Surface over Tank: \_\_\_\_\_  
Discharge Elevation: \_\_\_\_\_  
Length of Building Sewer (House to Tank): \_\_\_\_\_  
Extraordinary Conditions Shown: \_\_\_\_\_

**The Installer warrants that the proposed site is adequate to allow the installation of a private sewage disposal system as per the Illinois Private Sewage Disposal System Code. The Installer is responsible for proper and legal installation and the property owner is responsible for any nuisance or health hazards. The Marion County Health Department does not guarantee trouble free operation of the disposal system, only that it complies with the above-mentioned Code.**

**As per 905.20 of the Illinois Code, the homeowner's signature on the construction permit for any system being installed, repaired, or renovated serves as written acknowledgement that the property owner(s) is aware of and accepts the responsibility to service and maintain the sewage system in accordance with the act and to maintain all maintenance records.**

**Signing this application gives the Marion County Health Department the right to enter the property to conduct the inspection of this system.**

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.

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Homeowner

\_\_\_\_\_  
Date

**For Surface Discharging Private Sewage Systems Only  
(Aeration Units, Buried Sand Filters and Lagoons)**

As of 2/10/2014, surface discharging private sewage disposal systems from which effluent enters into the Waters of the United States that require a NPDES permit, a permit can be obtained from the US Environmental Protection Agency (USEPA). Systems permitted under the NPDES permit shall be in compliance with the terms and conditions of the NPDES permit. Information about the applicability of the NPDES permit for surface discharging private sewage disposal systems shall be obtained from USEPA at 1/800-621-8431 or [www.epa.gov/region5/water/npdestek/surfacedischarge](http://www.epa.gov/region5/water/npdestek/surfacedischarge).

The homeowner is the responsible party for deciding if the effluent from their surface discharging private sewage disposal system will enter into the Waters of the United States. The MCHD and the Illinois licensed private sewage contractor installing your system are not liable for the decision the homeowner makes concerning their NPDES permit.

Please mark yes or no that the effluent from your surface discharging private sewage disposal system will enter into the Waters of the United States.

☐ Yes      ☐ No

If you marked yes, please contact the USEPA to obtain a NPDES permit.

If you marked no and the USEPA receives a complaint and determines that you did need a NPDES permit, the USEPA will seek legal action and possibly monetary fines.

The Marion County Health Department private sewage permit is not the same as a NPDES permit. The issuance of the Marion County Health Department private sewage permit does not mean you, the homeowner, have complied with the Clean Waters Act and the NPDES permit. The USEPA is the enforcing agency for the Clean Water Act and the NPDES permit.

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**Signature of Homeowner/Property Owner**

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**Date**