

Williamson County Office:
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Franklin County Office:
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PRIVATE SEWAGE DISPOSAL
APPLICATION CHECKLIST

- ____ Owner's and contractor's signature required on permit
____ Name – 911 Address – Phone number – Directions to job site
____ Minimum Information
- | | |
|--------------------------|------------------------|
| ____ Lot size | ____ Size of system |
| ____ Location of system | ____ Site elevations |
| ____ Distance parameters | ____ Water supply type |
| ____ Type of system | ____ Soil Evaluation |
- ____ Hot tub and/or water softener
____ Garbage Grinder
____ Clean- out locations
____ Septic tanks/aerobic units, distributor and model number
____ Approved pipe – type and ASTM#
____ Audible/Visual alarms(s) location
____ Pumps and pumping chamber
____ Effluent reduction required if applicable
____ Disinfection if applicable
____ Non-residential (review requirements)
____ Flow rates
____ Review requirements for specific type of system
____ NPDES permit from USEPA/IEPA if needed