

**RESIDENTIAL OR COMMERCIAL BUILDING SEWER APPLICATION**

To the City of Carlinville:

A: THE UNDERSIGNED, being the \_\_\_\_\_  
(Owner, Owner's Agent)

For the property located at \_\_\_\_\_  
DOES HEREBY REQUEST a permit to install and connect a building or house to serve the  
\_\_\_\_\_ (Residence, Commercial Bldg., etc.) at said location.

The maximum number of persons who will use the above fixtures is \_\_\_\_\_.  
The name, address and phone # of the person or firm who will perform the proposal work is  
\_\_\_\_\_. The Illinois License # for the above Company is \_\_\_\_\_.

**There must be a business card attached to this application.**

Plans and specifications for the proposed building sewer are attached hereunto as Exhibit "A".

**\*\*\*For Outside City Limits:** Any property outside of the City Limits of the City of Carlinville, Macoupin County, Illinois, for which a sewer tap is applied shall be annexed into the City Limits prior to or at the time of receiving the sewer tap or any other time agreed to by the City of Carlinville. If said annexation cannot occur at the time of obtaining of the sewer tap because of the subject property not being contiguous to the City of Carlinville or because of any other existing State of Illinois laws, rules or regulations, then the owner of the subject property hereby agrees with the City of Carlinville to annex the property into the City upon it becoming capable of being annexed.

**B:** In consideration of the granting of this permit, THE UNDERSIGNED AGREES:

To accept and abide by all provisions of the City Code of the City of Carlinville and of all other pertinent ordinances or regulations that may be adopted in the future.

To maintain the building sewer at no expense to the City.

To notify the City of Carlinville when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_  
Signature of Owner if different than applicant: \_\_\_\_\_  
Address of Owner \_\_\_\_\_ Phone # \_\_\_\_\_

\$ \_\_\_\_\_ connection fee paid. Check # \_\_\_\_\_ /Cash \_\_\_\_\_

The following indicated fixtures would be connected to the proposed building sewer.

<u>NUMBER</u>	<u>FIXTURES</u>	<u>NUMBER</u>	<u>FIXTURES</u>	<u>NUMBER</u>	<u>FIXTURES</u>
_____	Kitchen Sinks	_____	Bathtub/Shower	_____	Garbage Disposals
_____	Bathroom Sinks	_____	Washer	_____	Toilets

Specify any other fixtures \_\_\_\_\_

Application approved and permit issued:      DATE APPROVED: \_\_\_\_\_

Committee,

\_\_\_\_\_  
\_\_\_\_\_