

Permit #: \_\_\_\_\_  
Service ID \_\_\_\_\_



# RESIDENTIAL BUILDING SEWER APPLICATION

A. THE UNDERSIGNED, being the \_\_\_\_\_ of property  
(Owner, Owner's Agent)  
located at \_\_\_\_\_ Parcel ID Number (PIN #) \_\_\_\_\_  
Number Street

DOES HEREBY REQUEST: a permit to install and connect a building sewer to serve the \_\_\_\_\_ at said location.

(Building type)

1. The following indicated fixtures will be connected to the proposed building sewer:

Number	Fixtures	Number	Fixtures	Number	Fixtures
_____	Kitchen Sinks	_____	Water Closets/Toilets	_____	Lavatories
_____	Bath Tubs	_____	Laundry Tubs	_____	Showers
_____	Urinals	_____	Garbage Grinders		

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

- The maximum number of persons who will use the above fixtures is \_\_\_\_\_.
- The name and address of the person or firm who will perform the proposed work is \_\_\_\_\_.
- Plans and specifications for the proposed building sewer are attached hereunto as Exhibit A.

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

- To accept and abide by all provisions of the Village Code of the Village of Downs and of all of the pertinent ordinances or regulations that may be adopted in the future.
- To maintain the building sewer from the building to the sewer main at no expense to the Village.
- To notify the Village when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered.

C. If remaining on your private septic system, attach a copy of the active private septic system permit from the McLean County Public Health Department. Current conditions must match permit.

**NOTE: YOU MUST RETURN THIS FORM EVEN IF YOU ARE NOT CONNECTING AT THIS TIME**

DATE: \_\_\_\_\_ SIGNED: \_\_\_\_\_  
(Applicant)

\_\_\_\_\_  
(Address of Applicant) (Phone number)

E-mail Address \_\_\_\_\_

Certification by Village Treasurer: \_\_\_\_\_ (FOR OFFICE USE ONLY)

\$ \_\_\_\_\_ connection fee paid. \$ \_\_\_\_\_ inspection fee paid.

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

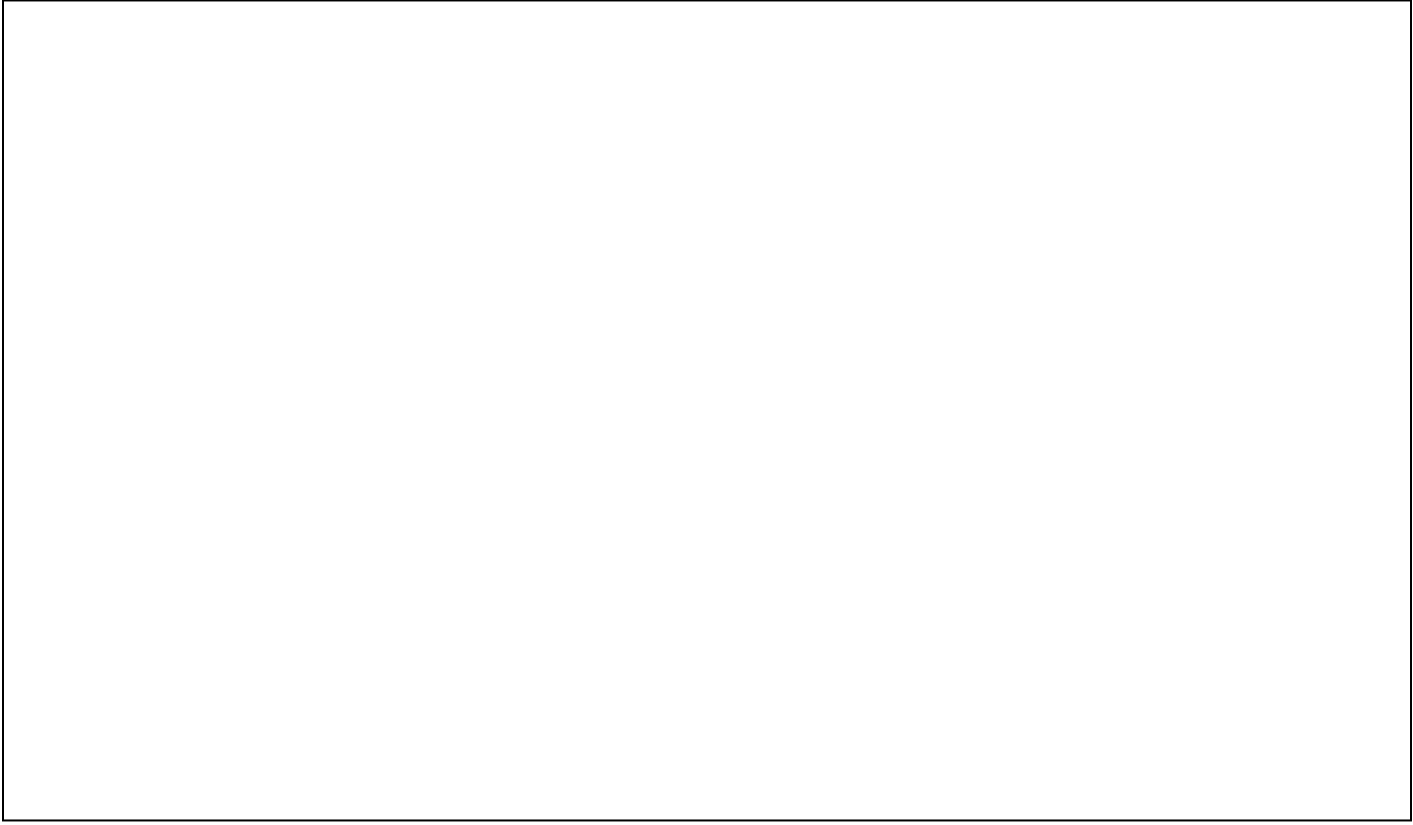
SIGNED: \_\_\_\_\_  
(Approving Authority)

The validity of this permit is conditioned upon all work performed hereunder being done in accordance with plans and specifications submitted and in compliance with BNWRD, City and State EPA Regulations and/or Ordinances. If actual work is not started under this permit within 6 months, it will automatically expire and become null and void. Should the party or parties to whom this permit is issued in any way violate any of the Ordinances of the Bloomington and Normal Water Reclamation District during the period when this permit is in effect, such violation shall of itself cause this permit to be null and void. Otherwise, same to remain in full force and effect. This permit is neither assignable or transferable. 201903

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**EXHIBIT A**  
**VILLAGE OF DOWNS**  
**SEWER CONNECTION PLAN**

Please draw the general location of your existing septic system and proposed sewer service line in the box below.



**FOR OFFICE USE ONLY**

1. **Permit #:** \_\_\_\_\_
2. **Property Owner:** \_\_\_\_\_
3. **Service ID #** \_\_\_\_\_
4. **Installer:** \_\_\_\_\_
5. **Inspector:** \_\_\_\_\_

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