



APPLICATION FOR PERMIT TO ABANDON SEPTIC TANK

Date of Application: _____

Name of Applicant: _____

Applicant is: Owner Contractor

Property Owner (if not applicant): _____

Address: _____

Phone: _____

Describe location of septic tank or other sewage disposal equipment to be abandoned:

Attach a drawing indicating street address of property, location of buildings on the property and location of septic tank.

Septic Tank will be pumped out by:

Company: _____

Address: _____

Phone: _____

After top of tank is crushed:

Will be filled with: _____

Will be covered with: _____

Sewer tap permit is needed: _____ Yes _____ No

Applicant must notify Sewer Superintendent 24 hours prior to work being done so that an inspection can be made. Permit expires in 30 days if work is not completed.

FOR OFFICE USE ONLY

SEWER DEPARTMENT INSPECTION REPORT:

I have inspected the above and certify that the same meets current Village Codes:

Date: _____

Signature of Inspector