



VILLAGE OF TOWER LAKES
 400 N. IL Route 59
 Tower Lakes, IL 60010
 Ph: (847) 526-0488
 Fax: (847) 526-0489

**INDIVIDUAL SEPTIC SYSTEM
 INSPECTION AND MAINTENANCE REPORT
 OPERATING PERMIT**

(Please Print)

Owner/Resident fills out sections 1,2,3 & 7

Inspector fills out sections 4, 5 & 6

1. OWNER			
Name:		Phone #:	
Address:		Email:	
2. ADDRESS OF SEPTIC SYSTEM			
Address:			
3. RESIDENCE INFORMATION			
# Bedrooms =	# Dens/Studies =	Basement? (Y/N) =	Shower/Tub in basement? (Y/N) =
4. EXISTING SEPTIC/SEWAGE DISPOSAL SYSTEM		<i>Information below to be filled in by licensed Inspection company.</i>	
Type of system:		Location:	
<i>Seepage Field -</i>	Type:	Condition:	OK <input type="checkbox"/> Or Other (explain):
<i>Septic Tank -</i>			
Date tank was last pumped:		Capacity (in gallons):	
Condition of tank:	OK <input type="checkbox"/>	Or Other (explain):	
Effluent level:	OK <input type="checkbox"/>	Or Other (explain):	
Condition of baffles:	OK <input type="checkbox"/>	Or Other (explain):	
Lift Station?	(Y/N) =	Alarm functioning?	(Y/N) = Or N/A =
Aerobic Treatment Unit?	(Y/N) =	Alarm functioning?	(Y/N) = Or N/A =
Aerator?	(Y/N) =	Type?	Size?
Current Service Contract?	(Y/N) =	Date of Last Service:	
Service Provider:			
Evidence of malfunction or defect with system?	(Y/N) =	If Yes, Explain:	
Corrective measures completed:			
5. VERIFICATION			
In consideration of this application and any attached documents being made a part hereof, and the issuance of a permit, I/we will conform to the regulations set forth in the applicable ordinance of the Village of Tower Lakes. I/we also agree that any work performed under said permit will be in accordance with the documents which accompany this application, except for such changes as may be directed in the permit issuance. I/we further state that the information provided herein is correct to the best of my/our knowledge.			
INSPECTION COMPANY Name:		Email:	
Address:		Phone #:	
Name of Inspector (Print):		Date of Inspection:	
6. SIGNATURE OF INSPECTOR:		PLEASE SUBMIT: 1. THIS SIGNED FORM 2. A COPY OF THE SERVICE RECEIPT 3. \$25 CHECK MADE OUT TO: "Village of Tower Lakes"	
7. SIGNATURE OF PROPERTY OWNER / RESIDENT:			
OFFICIAL USE ONLY			
Fee \$ Paid:			
Payment: Cash <input type="checkbox"/>	Or Check #:		
Date Received:			
Received by:			

Copy provided to Property Owner/Resident serves as permit and receipt of permit fees.