



City of Mascoutah
3 West Main Street
Mascoutah IL 62258-2030
(618) 566-2964
Fax: (618) 566-4897
Email: info@Mascoutah.com



Residential or Commercial Building Sewer Application

The undersigned, being the		of the property located
at		does hereby request a permit to install and connect a building
sewer to serve the		at said location.
	(residence, commercial building, etc.)	

1.	The following indicated fixtures will be connected to the proposed building sewer:				
	<u>NUMBER</u>	<u>FIXTURE</u>		<u>NUMBER</u>	<u>FIXTURE</u>
		Kitchen Sink			Water Closets
		Lavatories			Bathtubs
		Laundry Tubs			Showers
		Urinals			Garbage Grinders
	Specify Other Fixtures:				

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

IN CONSIDERATION OF THE GRANTING OF THIS PERMIT, THE UNDERSIGNED AGREES:

1.	To accept and abide by all provisions of the City Code, and of all other pertinent ordinances and codes that may be adopted in the future.
2.	To maintain the building sewer at no expense to the City.
3.	To notify the City when the building sewer is ready for inspection and connection to the public sewer, but before any portion of the work is covered.

DATE: / / 20

SIGNED: _____
APPLICANT

ADDRESS OF APPLICANT

(CERTIFICATION BY CITY TREASURER)					
\$		(Inspection Fee		Date:	
		Paid)			
\$		(Connection Fee		Signed:	
		Paid)			
					CITY TREASURER

(APPLICATION APPROVED AND PERMIT ISSUED)					
DATE:		/	/ 20	Signed:	
					(CITY MANAGER



City of Mascoutah
3 West Main Street
Mascoutah IL 62258-2030
(618) 566-2964
Fax: (618) 566-4897
Email: info@Mascoutah.com



Application for Water System Service Connection

The undersigned, representing himself as owner of the property located at	
	, hereby makes application for connection to the Water System of the City for
said property, and in consideration of the furnishing of said service covenants and agrees as follows:	

- | | |
|----|--|
| 1. | I agree to abide by all rules and regulations as specified in and by the ordinances of the City now in effect or enacted and passed from time to time providing for the regulation of service furnished by the City, it is further acknowledged and agreed that the undersigned, his heirs, executors, administrators, successors and assigns shall pay all charges for connection fees and water usage which shall become due as the result of the connecting of the water mains and the furnishing of water service to the above property, and that all such charges and fees for water service rendered to the property, together with penalties, if any, and the costs of collection are to be considered and become a charge against the property, the lien so created to be enforced in accordance with the ordinance of the City. |
| 2. | All bills for the aforesaid charges are payable within fifteen (15) days following the receipt of said bill and if not paid, are subject to a five percent (5%) penalty. |
| 3. | Each and all of the agreements and covenants herein contained shall run with the real estate above described whose present owner is signatory to this application. |
| 4. | I understand that after making this application, I am to await installation permit and instructions therewith. |
| 5. | SERVICE CONNECTION FEE: \$ <input type="text"/> is enclosed herewith, payable to the City. |
| 6. | Permission is hereby granted to the City and its authorized representatives at any reasonable time to enter the premises of the applicant and any portion thereof for the purposes of inspecting all connections appurtenant to the Water System. |
| | |
| | |

CONNECTION MUST BE INSPECTED BEFORE BACKFILLING

Signature	<input type="text"/>	<input type="text"/>	<input type="text"/>
		STREET NUMBER AND NAME OF STREET	
		CITY, STATE AND ZIP CODE	
		PHONE NUMBER	DATE

Do not fill-in the spaces to the right if the information is the same as the applicant above.	MAIL BILLS TO:	(
		(NAME
		(STREET NUMBER AND NAME OF STREET
		(CITY, STATE AND ZIP CODE



Superintendent of Sewers



City of Mascoutah
3 West Main Street
Mascoutah IL 62258-2030
(618) 566-2964
Fax: (618) 566-4897
Email: info@Mascoutah.com



Application for Sanitary Sewer Service Connection

The undersigned, representing himself as owner of the property located at _____
_____, hereby makes application for connection to the Sanitary Sewerage Service of the City for
said property, and in consideration of the furnishing of said service covenants and agrees as follows:

1. I agree to abide by all rules and regulations as specified in and by the ordinances of the City now in effect or ordinances enacted and passed from time to time providing for the regulation of the sanitary sewer system or specifying fees and rates to be charged for connection and sanitary sewer service furnished by the City. It is further acknowledged and agreed that the undersigned, his heirs, executors, administrators, successors and assigns shall pay all charges for connection fees and sewer usage which shall become due as the result of the connecting of the sewerage mains and the furnishing of sanitary sewerage service to the above property, and that all such charges and fees for sanitary sewerage service rendered to the property, together with penalties, if any, and the costs of collection are to be considered and become a charge against the property, the lien so created to be enforced in accordance with the ordinance of the City.
2. All bills for the aforesaid charges are payable within ten (10) days following the receipt of said bill and if not paid, are subject to a five percent (5%) penalty.
3. Each and all of the agreements and covenants herein contained shall run with the real estate above described whose present owner is signatory to this application.
4. I understand that after making this application, I am to await installation permit and instructions therewith.
5. SERVICE CONNECTION FEE: \$ _____ is enclosed herewith, payable to the City.
6. Permission is hereby granted to the City and its authorized representatives at any reasonable time to enter the premises of the applicant and any portion thereof for the purposes of inspecting all connections appurtenant to the sewer outlets, pipes and mains.

Signature			
		STREET NUMBER AND NAME OF STREET	
		CITY, STATE AND ZIP CODE	
		PHONE NUMBER	DATE

Do not fill-in the spaces to the right if the information is the same as the applicant above.	MAIL BILLS TO:	(
		(NAME
		(STREET NUMBER AND NAME OF STREET
		(CITY, STATE AND ZIP CODE



City of Mascoutah
3 West Main Street
Mascoutah IL 62258-2030
(618) 566-2964
Fax: (618) 566-4897
Email: info@Mascoutah.com



Certificate of Inspection, Approval and Permit

IT IS HEREBY CERTIFIED THAT inspection has been made of the individually-owned sewer mains and sanitary service connection for the property described below, and said installation is hereby approved as in compliance with the Specification, Rules and Regulations established by the Revised Code (Ch. 38) of this Municipality.

Permission is hereby granted to complete the construction of said individually-owned sewer main to the City Sanitary Sewerage System and to utilize the same for waste disposal in compliance at all times, with Revised Code of the City.

NO.		
ADDRESS:		
(CITY, STATE, ZIP)		
TYPE OF CONNECTION:	Single-Family Residence	
	Multiple Dwelling or Trailer Court	
	Commercial	
	Industrial	
	Institutional	
	Governmental	
INSTALLATION BY:		
	THE SERVICE IS IN OPERATION AS OF THIS	DAY OF , 20
	CITY OF MASCOUTAH ST. CLAIR COUNTY, ILLINOIS	
	SIGNED:	



City of Mascoutah
3 West Main Street
Mascoutah IL 62258-2030
(618) 566-2964
Fax: (618) 566-4897
Email: info@Mascoutah.com



Receipt
Sanitary Sewer Service Connection

Receipt is hereby acknowledged of the executed Application for Sanitary Sewer Service Connection from the person and for the property indicated below.

This receipt does not authorize service connection is made, inspection and approval of the customer service line by an authorized representative of the City is required, and approval of such connection and issuance of a Certificate of Inspection and Approval and Permit is conditioned upon compliance with all the Ordinances, Coded, Rules and Regulations of the City.

NOTE:

1. In the event the location of the sewer service connection is unknown, the Superintendent is to be contacted.
2. This office is to be notified the day before the work is to be done so that an inspection may be arranged in accordance with specifications furnished. For example, if you desire inspection on Tuesday, contact us on Monday. If you desire an inspection on Monday, contact us on Friday, etc.
3. If the sewer line is deep enough to drain your basement, if you have one, then the wastes from the basement as well as the floor(s) of the property must go into the sanitary sewers. Downspout and surface drainage are prohibited inasmuch as this is not a storm sewer system.

WARNING: In order to coordinate our inspections, we must be advised a day in advance before the work is done. The inspection must be made before the trench is backfilled. If the trench is backfilled before the inspection is made, it will have to be reopened to permit inspection.

NO:		CITY OF MASCOUTAH ST. CLAIR COUNTY, ILLINOIS
DATE:		
ADDRESS:		
OWNER(S)		