

WILL COUNTY HEALTH DEPARTMENT

Environmental Health

501 Ella Ave
Joliet, IL 60433
(815) 727-8490
(815)740-8147 (fax)

323 Quadrangle Dr.
Bolingbrook, IL 60440
(630) 679-7030
(630) 679-7031 (fax)

5601 W. Monee Manhattan Rd. Ste. 109
Monee, IL 60449
(708) 534-0800
(708)534-3455 (fax)

- WELL AND SEPTIC SURVEY -

This section must be completed in its entirety by the seller or seller's representative prior to the survey by the Will County Health Department. Failure to provide complete information could result in an unnecessary delay in the issuance of a final report.

REQUESTOR INFORMATION	
Name	
Address	
City, state, zip code	
Phone Number	
Fax Number	
Email	

PROPERTY INFORMATION			
Tax #			
Township Name			
Subdivision			
Present Owner's Name		Present owner's phone number	
Previous/Original Owner's Name			
House Construction Date			
Builder's Name			
Survey Location			
Is House Occupied?		If no, how long has it been vacant?	
Whom to Contact for Entry		Phone Number	

Are there any conditions (known to the owner or occupant) existing on this property at the time of this survey that may adversely affect the water supply or sewage disposal system? YES _____ NO _____ If yes, please explain: _____

I UNDERSTAND THAT THE FEE FOR THIS SERVICE IS \$200.00 PAYABLE IN ADVANCE AND THAT THE SURVEY REPORT REQUIRES 7 TO 10 WORKING DAYS. PAYMENT MAY BE MADE BY CASH, CHECK PAYABLE TO 'WILL COUNTY HEALTH DEPARTMENT' OR BY CREDIT CARD.

SIGNATURE _____ TITLE _____ DATE _____