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Ford County Public Health Department

235 North Taft Street

Paxton, IL 60957

**AFFIDAVIT FOR HOMEOWNER’S COMPLIANCE WITH**

**ILLINOIS PRIVATE SEWAGE DISPOSAL LICENSING ACT AND CODE**

 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Permit # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I (print name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, owner of the property located at (address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

am aware of, and accept the responsibility to service and maintain the private sewage disposal system in accordance with the Illinois Private Sewage Disposal Licensing Act (225 ILCS 225) and the Illinois Private Sewage Disposal Code (77111. Adm. Code Part 905).

1. As a condition of applying for an installation approval required by Section 905.190, the signature by the property owners on the installation approval submission/construction permit for any private sewage disposal system being installed, repaired or renovated, serves as written acknowledgement that the property owners are aware of and accept the responsibility to service and maintain the private sewage disposal system in accordance with the Act and this Part.
2. The property owner or the private sewage disposal system owner shall maintain all maintenance records on forms provided or approved by the Department (Illinois Department of Public Health) and make records available upon request by the Department or Local Authority. These records shall be transferred from owner to owner. Records shall be kept for the life of the system.

This affidavit acknowledges that I have been notified of the law and am responsible for the service and maintenance of the private sewage disposal system.

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 Signature of Owner Date