



FULTON COUNTY HEALTH DEPARTMENT

700 East Oak Street, Canton, IL 61520-3157
309-647-1134

Sub-Offices

Astoria, IL 61501
309-329-2922

Cuba, IL 61427
309-785-5300

PLAT REVIEW APPLICATION

Fee: \$50.00 Plat Review
+\$25.00 per Parcel Review

Date Paid

Rec'd by

SUBDIVISION NAME: SECTION# LOTS

LEGAL DESCRIPTION: TWSP:

DEVELOPER PHONE

ENGINEER PHONE

DATE SUBMITTED TO HEALTH DEPT.

PUBLIC SEWER CONNECTION FEASIBILITY SUBMITTED: YES NO

PLAT SUBMITTED: YES NO

SOIL CHARACTERISTICS SUBMITTED: YES NO

PERCOLATION TESTS SUBMITTED: YES NO

HEALTH DEPT. USE ONLY

DATE RECEIVED RECEIVED BY

REVIEWED BY DATE

COMMENTS:

RECOMMEND: APPROVAL DENIAL SIGNATURE

DIRECTOR OF ENVIRONMENTAL HEALTH

PLAT REVIEW RESULTS

SUBDIVISION NAME \_\_\_\_\_ TWSP \_\_\_\_\_

LEGAL DESCRIPTION \_\_\_\_\_

OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

ENGINEER \_\_\_\_\_ PHONE \_\_\_\_\_

NUMBER OF LOTS \_\_\_\_\_ WATER SUPPLY: PUBLIC \_\_\_\_\_ PRIVATE WELLS \_\_\_\_\_

LOT SIZE \_\_\_\_\_ PUBLIC SEWAGE DISTANCE \_\_\_\_\_ FT/MILES

PERCOLATION DATA:

<u>TEST SITE</u>	<u>HOLE # 1</u>	<u>HOLE # 2</u>	<u>HOLE # 3</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

SOIL CHARACTERISTICS:

VISUAL \_\_\_\_\_ SOIL MAP \_\_\_\_\_

PROPOSED SEWAGE DISPOSAL SYSTEM:

TYPE: \_\_\_\_\_ EASEMENTS REQUIRED: YES \_\_\_\_\_ NO \_\_\_\_\_

RECOMMEND: APPROVAL \_\_\_\_\_ DENIAL \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE OF REVIEW \_\_\_\_\_ SIGNATURE \_\_\_\_\_

PLAT DESIGN: APPROVED DENIED SIGNATURE \_\_\_\_\_

DIRECTOR OF ENVIRONMENTAL HEALTH