



# OGLE COUNTY HEALTH DEPARTMENT

907 WEST PINES ROAD, OREGON, IL 61061  
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Ogle County Realtors

Re: Loan Inspection Forms

November 13, 2008

Enclosed you will find a copy of the new request form for sanitary loan inspections. The new rates will become effective December 1, 2008. **Read thru the form closely as there have been some changes.** One of the new features is the option of having an inspection completed within 1-2 days of receiving the application with the water lab results available 1 day from the date of the inspection. If you have any questions on any of the items on the form, please call Gerry Hough at x347 or myself at x363.

I will again mention that only Licensed Environmental Health Inspectors (LEHP) are allowed by law to conduct environmental loan inspections. There are some individuals that have been doing these inspections that are not licensed and the law is very specific on this. If you have any questions on this, contact me or call the Regional Office of the Illinois Department of Public Health at (815) 987-7511 for clarification.

Respectfully,

Myron Richter B.S., L.E.H.P.  
Director of Environmental Health  
Ogle County Health Department

Note: Additional forms can be downloaded at:  
[Oglecountyhealthdepartment.org](http://Oglecountyhealthdepartment.org)  
click on the well/septic link  
click on Sanitary Survey Application

**SANITARY SURVEY APPLICATION FORM**

Please complete as thoroughly as possible!

Property Address: \_\_\_\_\_ City \_\_\_\_\_ PIN#: \_\_\_\_\_

Subdivision Name \_\_\_\_\_ Lot # \_\_\_\_\_ Directions to Property from Oregon: \_\_\_\_\_

Present Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Original Owner \_\_\_\_\_ Builder's Name \_\_\_\_\_

House Empty?: \_\_\_\_\_ If Yes, how long? \_\_\_\_\_ Year Built \_\_\_\_\_ # of Bedrooms \_\_\_\_\_

**WELL INFORMATION**

*(We need to see the top of the well and to have access to a sampling point. If this is not possible, we will need access inside the house. The water being sampled should not go through a whole house filter or water softener. Health department employees will not enter home UNLESS accompanied by owner or owner's authorized agent)*

Age of Well: \_\_\_\_\_ Is there an operational outside faucet? \_\_\_\_\_ If yes, faucet is located \_\_\_\_\_

**Type of Well** Community Water \_\_\_\_\_ Pit \_\_\_\_\_ Shared Well \_\_\_\_\_ Private Well \_\_\_\_\_

**Location of Well** Basement \_\_\_\_\_ Outside \_\_\_\_\_ Other \_\_\_\_\_

**Filters** Water Softener \_\_\_\_\_ Reverse Osmosis, Location \_\_\_\_\_

**Other** Cistern \_\_\_\_\_ Abandon Well \_\_\_\_\_ Other, Explain \_\_\_\_\_

**SEPTIC INFORMATION**

**Private Septic Information**

Type of Septic  
Private \_\_\_\_\_ Public \_\_\_\_\_

Approximate age of sewage system \_\_\_\_\_ Installed by: \_\_\_\_\_  
Date tank was last pumped \_\_\_\_\_ Pumped by \_\_\_\_\_

Inspection includes a 15 min, 3 faucet test. **THE TANK MUST BE UNCOVERED AND OPEN AT TIME OF INSPECTION.** Someone will be required to be present. Please provide name and phone # of person who will be meeting us on site:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Alternate \_\_\_\_\_ Phone \_\_\_\_\_

(Please note, no inspection will be done until contact and a time as been set.)

Will Seepage Field be uncovered at time of inspection? \_\_\_yes\_\_\_no

If no septic installation information is available from our records, usually before 1991, our report will state "We were not supplied with enough information to verify the existence of a septic system", unless we are supplied with more information or if the field lines are uncovered enough to verify its existence.



**Required.** Please sketch a drawing of the site. This should include location of well and septic in relation of the house.

**Please mark the type of evaluation you are requesting:**

Note: Documentation of the septic system or well construction will be included in the report of findings, if said documentation is on file with the OCHD. **Note: All fees are non-refundable.**

Well & Septic <input type="checkbox"/> \$150.00	Includes site inspection of well; visual inspection of septic for signs of septic failure, including 15 min 3 faucet test; visual site inspection for any evidence of abandoned wells. Inspection will also include the initial water sample testing for Coliform bacteria and Nitrates. Additional charges will apply if additional samples are needed.	Inspection will be done the Monday or Tuesday after receipt of completed application. Lab results available approximately 1 week from the date of inspection
One-Two Day Service <input type="checkbox"/> \$100.00	This fee is in addition to any other fee listed.	Inspection will be done within 1-2 days of receipt of completed application. Lab results will be available 1 day from the date of inspection. Note: No inspections will be done on Fridays or Holidays.
Well Only <input type="checkbox"/> \$120.00 + lab fees	Includes site inspection of well; plus water testing of your choice. (This fee applies <u>ONLY</u> to properties with community sewer - if property is <u>NOT</u> on community sewer, the \$150.00 fee will apply, all properties with private septic systems will be addressed in our inspection.). Site will also be inspected for evidence of abandoned wells. *See below for lab tests.	Inspection will be done the Monday or Tuesday after receipt of completed application. Lab results available approximately 1 week from the date of inspection
Septic Only <input type="checkbox"/> \$120.00	Includes visual inspection for signs of failure along with 15 minute 3 faucet test; in addition to services requested in this application (If a private well exists on the property, no water sample will be taken - but the well casing and/or pit will be inspected to ascertain compliance with the Illinois Well construction code). Site will also be inspected for evidence of abandoned wells.	Inspection will be done the week after receipt of completed application
Feasibility Study <input type="checkbox"/> \$75.00	Site visit to ascertain the feasibility of community services.	Inspection will be done the week after receipt of completed application

**\* Available Water Lab Testing**

<input type="checkbox"/> Bacteria \$20	<input type="checkbox"/> Nitrates \$15 each test	<input type="checkbox"/> Iron \$15 <input type="checkbox"/> Hardness \$15	<input type="checkbox"/> Fluoride \$	Other: Lab cost +p/h 5%
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**Other Fees that may occur:**

Follow-Up Visit on pending evaluations: \$20 plus lab fees - must be paid prior to return to site unless other arrangements have been made.

Failed Inspection \$20 - must be paid prior to return to site unless other arrangements have been made. (unable to access a sampling point; unable to see top of well; etc)

**→ Please Note! Any 'open' evaluation that has had no activity after our initial inspection will automatically be closed one (1) month from the original order date. If the file needs to be re-opened, a new application and fee will be required.**

This survey is being requested by:

Owner    Attorney    Other \_\_\_\_\_    Realtor, Company Name \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_

Signature \_\_\_\_\_ Lock Box # \_\_\_\_\_ Projected Closing Date \_\_\_\_\_ Phone \_\_\_\_\_

Where should Report be Sent

Fax Report: to: \_\_\_\_\_

Check **ONE ONLY**:

Mail Report to: Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_