

ENVIRONMENTAL HEALTH OFFICE  $1300 \text{ W } 2^{\text{ND}} \text{ STREET}$  ROCK FALLS, IL 61071  $\diamond \diamond \diamond \diamond$  PHONE: (815) 772-7411 EXT. 104 FAX: (815) 772-4723

## Non Potable Water Well Compliance Agreement

The undersigned is currently served by the public water supply but wishes to construct a private water well for irrigation purposes only.

The undersigned understands that the well to be used for irrigation is not intended for human consumption and that the two water supplies cannot now or any time in the future be connected to one another (with either permanent or temporary connection) since the private well has the potential of contaminating the public water supply.

The undersigned agrees to install the private well a minimum 10' from all sewer laterals and a minimum 2' outside of the roof overhang per section 920.50 d) of the Illinois Water Well Construction Code. The undersigned also agrees to maintain the private well for irrigation purposes only and to not make a cross connection between well system and the public water supply.

Property Owner	Address	
Signature of property owner:		Date:
	FOR OFFICE USE ONL	Y
Reviewed By:		Date:
Reviewed By:	Health Department Representative	Date:
Reviewed By:	Health Department Representative	Date:
Approved	Health Department Representative	