

Four Rivers Sanitation Authority
Engineering Dept.
3501 Kishwaukee Street
Rockford, IL 61109

_____ **SCHEDULE A SERVICE CONNECTION(S)**

_____ **SCHEDULE B SEWER EXTENSION(S)**
(Check One)

This form is for use for sanitary sewer connections or extensions for flows having domestic wastewater characteristics.

1. **NAME OF PROJECT:** _____

2. **TYPE OF SERVICE(S):** Residential ___; Commercial ___; Industrial ___; Recreational ___

3. **NATURE OF PROJECT:** Project consists of: a sewer extension ___; a sewer connection ___; a trunk sewer ___; a replacement sewer ___; a relief sewer ___; an interceptor sewer ___; a new sanitary sewer ___. (Check all that apply.)

4. **PROJECT LOCATION, SERVICE AREA AND POPULATION:** Submit map(s) of the service area that includes the following:

4.1 An 8 ½ x 11 inch detailed project location map or USGS map showing the project with respect to major roadways. In lieu of this map, a letter from the Illinois Historic Preservation Agency indicating compliance with the Illinois Historical Preservation act for this project may be submitted.

4.2 The proposed sewer layout and project location.

Township _____ Section _____ Range _____

4.3 Residential and/or non-residential areas and their associated waste loads to be immediately served by the sewers of this project.

4.4 Potential residential and/or non-residential areas and their associated loads must be included in the overall design of the sewers of this project.

5. **FACILITIES PLANNING AREA:** This project is ___ is not ___ being constructed entirely within the Facilities Planning Area (FPA) boundaries. Name of FPA: Four Rivers Sanitation Authority

6. **TYPE OF DEVELOPMENT:** The following design criteria should be used in estimating the population equivalent (P.E.) of a residential building:

Efficiency or Studio Apartment	= 1	P.E.
1 Bedroom Apartment	= 1.5	P.E.
2 Bedroom Apartment	= 3	P.E.
3 Bedroom Apartment	= 3	P.E.
Single Family Dwelling	= 3.5	P.E.
Mobile Home	= 2.25	P.E.

Commonly used quantities of sewage flows from miscellaneous type facilities are listed in Appendix B, Table No. 2 of the Illinois Recommended Standards for Sewage Works.

6.1 **RESIDENTIAL BUILDINGS:** Number of building(s) ___; Number of single family dwelling building(s) ___;

Number of multiple dwelling buildings* ___; Estimated total population ___ P.E.

*Please provide an itemized list for each multiple dwelling building including: Number of 1,2 and 3 bedroom units; the total P.E. for each building and the total P.E. for multiple family dwellings. Attach supplemental pages as needed.

6.2 **NON-RESIDENTIAL BUILDINGS:** Describe use of building(s) _____

Principal product(s) or activities _____

Number of building(s) to be served under this Permit _____

Estimated number of employees _____; Estimated number of occupants (transients) _____.

Estimated population equivalent (one population equivalent is 100 gallons of sewage per day, containing 0.17 pounds of BOD₅ and 0.20 pounds of suspended solids). Flow P.E. _____; BOD P.E. _____; Suspended Solids P.E. _____.

Non-domestic waste is _____ is not _____ produced inside the building(s). If liquid wastes other than domestic are produced, submit a data sheet. An IEPA Permit may be required.

6.3 Total loading for this project (Sum of 6.2 and 6.1) Design Average Flow _____ GPD; Design Max. Flow _____ GPD
P.E. _____ BOD; P.E. _____ Suspended Solids

7. **DEVIATION FROM DESIGN CRITERIA:** The design criteria for sewers are contained in the "Illinois Recommended Standards for Sewage Works", Current Edition. This submittal does _____ does not _____ include deviations from said criteria. **If deviations are included, justification for said deviations must be attached.**

7.1 Will "Standard Specifications for Water and Sewer Main Construction in Illinois", Current Edition, govern the construction of this system? YES _____ NO _____. If "NO" specifications must be furnished for the construction of the sewer.

8. **INFILTRATION/EXFILTRATION LIMITS:** _____ gallons per inch diameter of sewer pipe per mile per day.

9. **SUMMARY OF SEWERS:** Submit plan and profile drawings for all sanitary sewer extensions and for all sanitary sewer connections where either the domestic wastewater source serves more than one building, where the domestic wastewater source is 15 P.E. or more, where non-domestic waste is produced or where the connection is not direct to either a publicly-owned or publicly-regulated sewer.

	Schedule A Connections		Schedule B Extensions		
Pipe size – inches					
Total Length – feet					
Min. Slope used - %					
Max. Slope used - %					
Min. cover over sewers – feet					
Pipe Material & Specs.					
Joint Material & Specs.					
Total Manholes					
Max. Distance Between Manholes					
Bedding Class for Rigid Pipe (A,B, or C per ASTM C12)					
Bedding Class for Flexible Pipe (IA, IB, II, or III per ASTM 2321-89)					

9.1 Is the project located in a flood plain? YES _____ NO _____. If yes, contact the Illinois Department of Natural Resources, Division of Water Resources Management for further permit requirements.

9.2 Water tight manhole covers used on all manholes where the manhole tops are below cover or where the tops may be flooded by surface runoff or high water? YES _____ NO _____.

10. **EROSION CONTROL:** The design criteria for Erosion Control are contained in the "Illinois Urban Manual" Current Edition, distributed by the National Resource Conservation Service. This submittal does _____ does not _____ include deviation from said criteria. If deviations are included, justification for said criteria must be attached. (See instructions for Schedule P to determine if Schedule P must be submitted.)

11. EXISTING SEWER SYSTEM:

11.1 This project will connect to ___ a proposed sanitary sewer ___ an existing combined sewer ___ an existing sanitary sewer. This project ___ is ___ is not tributary to a combined sewer system. (If project is tributary to a combined sewer system, provide a written discussion and demonstration of potential affects on downstream combined sewer overflows.)

11.2 Size and location of downstream sewer _____

12. WATER SUPPLY PROTECTION: The horizontal and/or vertical separation between sanitary sewers and watermains is in accordance with Section 370.350 of the Illinois Recommended Standards for Sewage Works.
YES _____ NO _____

The location of proposed and existing watermain(s) must be shown in both the plan and profile views on plan sheets (s) for each water-sewer line crossing and at all locations within 10 feet horizontal distance of the proposed sewer line. Detailed drawing(s) for crossings, either typical or site-specific, shall be shown on the plan sheet(s).

12.1 HORIZONTAL SEPARATION: All sewer line(s) is (are) 10 feet from water line (s) YES ___ NO ____.
If no, provide justification AND describe the precautionary features against contamination _____

All proposed forcemain(s) 10 feet from water line(s) YES ___ NO ___ N/A ____.

12.2 VERTICAL SEPARATION:

- A. The water line(s) is (are) at least 18 inches above the sewer line(s) YES ___ NO _____. If no, continue with 12.2.B and provide justification below as to why this is not possible and describe precautionary measures taken to prevent contamination.
- B. The water line(s) is (are) above the sewer line(s) but less than 18 inches YES ___ NO _____. If no, continue with 12.2.C and provide justification below as to why this is not possible and describe precautionary measures taken to prevent contamination.
- C. The water line(s) is (are) at least 18 inches below the sewer line(s) YES ___ NO _____. If no, provide justification below as to why this is not possible and describe precautionary measures taken to prevent contamination.

Justification and precautionary measures: (attach supplemental pages as needed)

12.3 Proximity to wells, reservoirs, and other potable water sources: YES ___ N/A ____.

If yes, Minimum distance _____ feet. Describe precautionary measures taken to avoid contamination:

Location of all potable water sources shown on plan sheets YES ___ NO ___ No Known Sources ____

13. PIPE AND MANHOLE TESTING:

- Is infiltration test included in plans, specifications, or special provisions? YES ___ NO ____
- Is exfiltration test included in plans, specifications, or special provisions? YES ___ NO ____
- Is air testing included in plans, specifications, or special provisions? YES ___ NO ____
- Leakage testing for manholes included in plans, specifications, or special provisions? YES ___ NO ____

14. FLEXIBLE PIPE TESTING:

Is deflection test included in specifications in accordance with the Illinois Recommended Standards for Sewage Works, Current Edition? YES ___ NO ___ N/A ____

15. MISCELLANEOUS REQUIREMENTS:

The following requirements should be included on the plan sheets where so indicated. For items where this is not specified, the requirements may be on the plan sheets, in the specifications, or in the special provisions:

- 15.1 Standard Specifications for Water and Sewer Main Construction in Illinois, Current Edition, govern the construction of this project. Yes ____ NO ____ . If no, please provide specifications.
- 15.2 Pipe and joint ASTM designation included on plan sheets. YES ____ NO ____
- 15.3 All flexible gravity sewer pipe installed in accordance with ASTM D2321-89; embedment materials for bedding, haunching, and initial backfill to at least 6 inches over the top of the pipe with Class IA or IB or II or III; processed material produced for highway construction used in the project classified according to particle size, shape, and gradation in accordance with ASTM D2321-89, Section 9 and Table 1.
YES ____ NO ____ N/A ____.
- 15.4 All rigid gravity sewer pipe installed in accordance with ASTM C12 and bedding material Class A, B, or C.
YES ____ NO ____ N/A ____.
- 15.5 Pickholes in all manholes likely to be flooded not larger than 1 inch in diameter and of the concealed type.
YES ____ NO ____ N/A ____.
- 15.6 All manholes numbered. YES ____ NO ____ N/A ____.
- 15.7 Match lines shown on all plan sheets. YES ____ NO ____ N/A ____.

This Agency is authorized to require this information under Illinois Compiled Statutes, 1998, Chapter 415, Title X, Section 5/39 et seq. Disclosure of this information is required under that Section. Failure to do so may prevent this form from being processed and could result in your application being denied.