

Sewer Service Application
 City of South Beloit
 519 Blackhawk Boulevard
 South Beloit, IL 61080
 Phone: (815) 389-3023 Fax: (815) 389-8830
K.Brandenburg@southbeloit.org

APPLICATION FOR SEWER CONNECTION

(Printed Name of Property Owner)	(Last 4 of SS# or Tax ID #)
(Service Address)	(Property Owner's Phone)
(Property Owner Billing Address)	(City) (State) (Zip)
(Signature of Property Owner)	(Date)
Witnessed By	(Date)

<u>OFFICE USE ONLY</u>	
DATE _____	ACCOUNT # _____ - _____
Property PIN _____ - _____	Lien: Y / N
Previous Unpaid Balances due _____	Lien Release Fee _____
Notes: _____	
The sewer utility reserves the right to deny sewer service when applications are incorrect or incomplete	

Be advised that the City of South Beloit accept no liability from any damage that may result from this area being flooded by the stoppage or back flow of sewers. The building shall be provided with a back flow or sanitary check valve by the owner. Any maintenance on the valve is the property owners responsibility.