

Washington County Health Department
177 South Washington St. ~ Nashville, IL 62263
Phone: (618) 327-3644 Fax: (618) 327-4229

Request For Variance

Illinois Department of Public Health Private Sewage Disposal Licensing Act and Code, Rule 905.20 1) Variances. If conditions exist at a proposed installation which make impractical or impossible compliance with the requirements of these Rules and Regulations, a variance may be requested by submitting to the Washington County Health Department a written proposal which is to be used in lieu of compliance with these Rules and Regulations. Such written request shall include pertinent data to support the request. The capability of the system to comply with the intent of these rules will be the basis for approval or denial of the variances. The Department of local authority will notify the applicant in writing its decision to either grant or deny the variance. A variance request shall be requested and approved before construction begins.

Date: _____ Permit Number: _____

Owner: _____

Property Address: _____

City: _____ State: _____ Zip: _____

Variance requested:

Signature of Owner: _____ Date: _____

Signature of Contractor: _____ Date: _____

For Office Use Only

Reason for Variance Approved:

Signature of Inspector: _____ Date: _____