

Illinois Department of Public Health
Division of Environmental Health
PRIVATE SEWAGE DISPOSAL PROGRAM
525 West Jefferson St., Springfield, IL 62761

PRIVATE SEWAGE EXAMINATION APPLICATION INFORMATION

Please read the following in its entirety.

- ▶ All applications must be in Springfield **at least 30 days before the date of examination.**
- ▶ The seating is limited. Applicants are placed, and seating reserved, as the Department receives completed applications based on availability of 1st and 2nd date selections.
- ▶ Only one examination may be taken by an applicant on any specific examination date. Applicants will be given 3 hours for taking the Installation exam and 2 hours for the pumping examination.
- ▶ Photograph of applicant must be attached to each application for examination. Current, clear, and color photo (think “passport photo”). No hats, dark glasses, or old driver’s license photographs will be accepted.
- ▶ Be sure to provide an e-mail address where the Letter of Attendance, study materials and results letters can be sent to. All study material(s) **letter of admission and result letter are sent electronically.** The Department has gone digital. “Hard Copies” of codes and study materials are no longer being printed.
- ▶ **License Illinois Plumbers and City of Chicago plumbers must send a copy of their Plumbing license with this form**
- ▶ Be sure to check the appropriate box regarding child support, sign and date your application. Only applicant’s signature is accepted.
- ▶ Applicants **will not** be allowed to bring any material into the examination other than pencils and a non-programmable calculator. All other necessary information to take the examination will be included in the examination booklet.
- ▶ Incomplete applications will be returned which may cause a delay in processing your application.
- ▶ **BE SURE TO SIGN THE CHECK.** Checks missing a signature will be returned which may cause a delay in processing your application.
- ▶ **Result letters will be email within 10 business days after the exam.**
- ▶ **PLEASE ALLOW 10 BUSINESS DAYS FOLLOWING THE EXAM DATE TO MAKE AN INQUIRY. Inquiries prior to such date may delay the grading process.**

PRIVATE SEWAGE EXAMINATION APPLICATION

**ATTACH CURRENT
2' X 2'
HEAD AND SHOULDERS
COLOR ONLY
PHOTOGRAPH
HERE**
No Hats or Dark Glasses
No Photocopies or
Old Driver's Licenses

RETURN TO:
Illinois Department of Public Health,
Division of Environmental Health,
525 W. Jefferson St.
Springfield, IL 62761 If you have any questions, telephone: 217.785.2069.

EXAMINATION FEE is \$100.00. EXAMINATION FEES ARE NOT REFUNDABLE.

Send Check or Money Order, Payable to Illinois Department of Public Health.

Have You Previously Taken an Examination? YES ____ (Date of Examination _____) or NO ____

Indicate by checkmark which examination is to be taken (only one examination may be taken on a specific date).
 Private Sewage Disposal Installation Contractor OR **Private Sewage Disposal Pumping Contractor**

IMPORTANT NOTE:

**LETTERS OF ATTENDANCE AND ALL STUDY MATERIALS ARE NOW BEING SENT ELCTRONICALLY.
PLEASE PROVIDE AN E-MAIL ADDRESS WHERE THIS INFORMATION CAN BE SENT.**

E-mail Address _____ (Required)

APPLICANT INFORMATION – Home and Business Information Sections MUST be Completed

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____
HOME MAILING ADDRESS _____ COUNTY _____
CITY _____ STATE _____ ZIP CODE _____ HOME TELEPHONE ____/____-____
SOCIAL SECURITY # ____/____/____ DATE OF BIRTH ____/____/____
PLUMBER'S LICENSE _____ EXPIRATION DATE _____

BUSINESS NAME _____
BUSINESS MAILING ADDRESS _____ COUNTY _____
CITY _____ STATE _____ ZIP CODE _____ BUSINESS TELEPHONE ____/____-____

INDICATE 1ST AND 2ND CHOICE FOR EXAMINATION DATE AND LOCATION

1) _____
DATE LOCATION
2) _____
DATE LOCATION

CHECK BOX, SIGN, & DATE THIS FORM. It is required by law (5ILCS 100/10-65) that all applicants complete and sign the following statement. Failure to check and sign this certification will result in the return of your application and delays in processing your license. Making a false statement may place you in contempt of court, (ILCS 110/10-65(c)). I hereby certify, under penalty of perjury, that issues of court ordered child support

- DOES NOT apply to me or
- I AM delinquent or
- I AM NOT more than 30 days delinquent in complying with a child support order.

Applicant's Signature _____ Date _____

IMPORTANT NOTICE. This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 84-670. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center. IL 482-0529 (REV. 9/2014)

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EXAMINATION DATE (Maximum attendees at site.)	DAY OF WEEK EXAM WILL BE HELD	START TIME	2025 EXAMINATION SITES	DATE APPLICATION IS DUE IN SPRINGFIELD (30 Days before the examination date)
January 17, 2025	Friday	1:00 PM	IALEHA, East Peoria, IL	December 17, 2024
January 28, 2025	Tuesday	1:00 PM	OWPI Conference & Tradeshow 1 Gateway Dr, Collinsville, IL 62234	December 30, 2024
February 5, 2025 (10 Max)	Wednesday	10:00 AM	Peoria Regional Office	January 8, 2025
February 26, 2025 (30 Max)	Wednesday	10:00 AM	Springfield – Illinois Department of Agriculture	January 29, 2025
February 26, 2025 (10 Max)	Wednesday	10:00 AM	Westchester Regional Office	January 29, 2025
March 5, 2025 (15 Max)	Wednesday	10:00 AM	Rockford Regional Office	February 5, 2025
March 26, 2025 (8 Max AM – Installers) (8 Max PM - Pumpers)	Wednesday	9:00 AM 1:00 PM	Metro East Regional Office	February 26, 2025
April 2, 2025 (10 Max)	Wednesday	10:00 AM	Champaign Regional Office	March 5, 2025
April 9, 2025 (30 Max)	Wednesday	10:00 AM	Springfield – Illinois Department of Agriculture	March 12, 2025
May 7, 2025 (10 Max)	Wednesday	10:00 AM	Marion Regional Office	April 8, 2025
June 4, 2025 (10 Max)	Wednesday	10:00 AM	Peoria Regional Office	May 6, 2025
June 11, 2025 (30 Max)	Wednesday	10:00 AM	Springfield – Illinois Department of Agriculture	May 13, 2025
July 16, 2025 (15 Max)	Wednesday	10:00 AM	Rockford Regional Office	June 17, 2025
August 13, 2025 (10 Max)	Wednesday	10:00 AM	Westchester Regional Office	July 15, 2025
September 10, 2025 (10 Max)	Wednesday	10:00 AM	Champaign Regional Office	August 10, 2025
September 17, 2025 (30 Max)	Wednesday	10:00 AM	Springfield – Illinois Department of Agriculture	August 19, 2025
October 8, 2025 (12 Max)	Wednesday	10:00 AM	Marion Regional Office	September 9, 2025
October 22, 2025 (15 Max)	Wednesday	10:00 AM	Rockford Regional Office	September 23, 2025
November 12, 2025 (30 Max)	Wednesday	10:00 AM	Springfield – Illinois Department of Agriculture	October 14, 2025

Please call to confirm seating availability before mailing application.
Call 217-782-5830 or e-mail DPH.privatesewage@illinois.gov