REQUEST FOR FINAL INSPECTION

METROPOLITAN WATER RECLAMATION DISTRICT OF GREATER CHICAGO LOCAL SEWER SYSTEMS SECTION 6001 PERSHING ROAD CICERO, IL 60804

Type or print this Request for Final Inspection (RFI) and submit in duplicate to the Local Sewer Systems Field Office at the above address. If there are any questions, please call the Field Supervisor at (708) 588-4055.

PERMIT NO	NAME OF PROJECT:		
LOCATION:	MUNICIPALITY: _	MUNICIPALITY:	
	Permittee to the Metropolitan Water Reclamation District of Gre. This request is for the (complete / partial) project. If partial, atted in support of the request: ***********************************		
CERTIFICATE BY INSPE	ECTION (P.E.) ENGINEER:		
NAME / COMPANY:	TELEPHONE NO.		
ADDRESS:	MUNICIPALITY:		
material and workmanship, that	pected the work covered by this permit during the progress of of I have not allowed any defective materials or poor workmanship with my approval and that it is in substantial conformance with the this project.	on the project. I further certify that the	
BY:	name and title of engineering representative)	DATE	
·	ture of engineering representative)	P.E. SEAL	
	CIPAL OR SYSTEM (P.E.) ENGINEER: TELEPHONE NO.		
ADDRESS:	MUNICIPALITY:		
	completed under this permit has been inspected and meets with uirements, and I hereby recommend the acceptance of this proje		
BY:		DATE.	
BY:	name and title of engineering representative) ture of engineering representative)	P.E. SEAL	
(Signat	* * * * * * * * * * * * * * * * * * * *		
CEDEUC AEE DV DEDM			
	t has been completed and approved; and that to the best of my kr d conditions of this Permit nor any local laws, rules, regulations at		
BY:		DATE	
(Pr	rint name and title of authorized official)		
BY:(Si	TELEPHONE NO.		

CERTIFICATE BY SEWER CONTRACTOR: (NOT required by MWRD) NAME / COMPANY: ____ TELEPHONE NO. ____ ADDRESS: _____ MUNICIPALITY: ____ I hereby certify that the above project has been constructed of approved materials and that the project has been completed in conformance with the intent of the plans and specifications and is hereby warrented to be free from defects. I further certify that I have read the MWRD permit covering the project and that I have not violated any of the terms and conditions of the Permit BY: _____ DATE. (Print name and title of authorized official BY: _____ _____ TELEPHONE NO. _____ (Signature of authorized official) CERTIFICATE BY DEVELOPER (CO-PERMITTEE): (NOT required by MWRD) NAME / COMPANY: TELEPHONE NO. ADDRESS: MUNICIPALITY: I hereby certify that the project has been completed to my satisfaction and is accepted by me. I assume full responsibility for any defects or malfunctions in the completed project. I further certify that I have not violated any of the terms and conditions of the permit. BY: ____ (Print name and title of authorized official) BY: (Signature of authorized official) **PARTIAL TEST:** If only a portion of the system covered by the permit is to be tested and approved, describe below. APPROVAL BY METROPOLITAN WATER RECLAMATION DISTRICT: The work covered by this permit has been tested and inspected and is hereby approved. The Permittee may grant occupancy at its option. This approval does not constitute a release from other obligations under the permit. P.E. MWRD AREA INSPECTOR: MWRD AREA ENGINEER: (Print name and title) (Print name and title) (Signature) (Signature) (Date) (Date)