



**Public Health**  
Prevent. Promote. Protect.

## Henry & Stark County Health Department

110 N Burr Blvd., Kewanee, IL 61443  
309-852-0197 ext. 266 Fax: 309-854-5575  
www.henrystarkhealth.com

### PLOT SURVEY REQUEST FORM

**Henry County**                       **Stark County**

No building, structure, area or premises shall be constructed or maintained for human occupancy, use or assembly in Henry & Stark Counties, without adequate supply of potable water and facilities for the sanitary and safe disposal of wastewater that could be a hazard to the health of the public or create objectionable nuisance conditions.

Therefore, when you plan to propose a subdivision, re-divide a subdivision, tract, parcel, lot of land or needing a building permit to include human occupancy or restrooms, it is best practice and beneficial for you to submit a "Henry/Stark County Health Department Plot Survey Form" as early as possible to Henry/Stark County Health Department. Please email this form to [eh@henrystarkhealth.org](mailto:eh@henrystarkhealth.org) If you have questions, please contact our office 309 852-0197 ext. 266.

Purpose of Request:  Subdivision     Re-divide a subdivision, tract, parcel, lot of land     Needing a building permit

Owner name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

#### I. PROPERTY INFORMATION

Site address \_\_\_\_\_ City \_\_\_\_\_

Lot # \_\_\_\_\_ Township \_\_\_\_\_ Section # \_\_\_\_\_

Legal description \_\_\_\_\_ Parcel \_\_\_\_\_

a. Square Footage of property \_\_\_\_\_ sq. ft.

b. Surrounding Land Use:

North \_\_\_\_\_ South \_\_\_\_\_

East \_\_\_\_\_ West \_\_\_\_\_

c. Number of buildings on property (house, garage, shed, etc.) \_\_\_\_\_

Square footage of each building: \_\_\_\_\_

d. Unused space left on property: \_\_\_\_\_

#### II. PROPOSED BUILDING INFORMATION

a. **Residential** # of bedrooms \_\_\_\_\_ # of bathrooms \_\_\_\_\_

Garbage grinder:  Yes  No    Water Softener:  Yes  No    Hot tub capacity \_\_\_\_\_ gallons

b. **Non-Residential** # of employees \_\_\_\_\_ # of restrooms \_\_\_\_\_ # of seats \_\_\_\_\_ -  with a kitchen  without a kitchen

c. **Sewage System**  Public  Private  Existing system  New system to be installed

d. **Water Supply**  Public Water Supply  Private Well -  existing well  new well to be installed

e. **Geothermal Closed Loop Well**  Will be installed  Will not be installed

#### III. SOILS CLASSIFIER REPORT ATTACHED

