



1135 South Lake Street • Montgomery, Illinois 60538
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Sanitary Sewer Overhead Assistance Program (S.O.A.P.)

SOAP Permit # S - 2 ___ - ___ ___ ___

Is the property inside City / Limits: (Circle One) Yes / No

City / Village application approval / permit attached: _____

Three detail cost estimates included: _____

Property Location: _____ City: _____ Proposed Work Date: _____

Property Owner Name: _____ Contact Phone Number: _____

Contract Email Address: _____ Bonded Contractor: _____

Contractor Phone Number: _____ Detailed Description of Work: _____

Perimeter drain tile (footing drains), storm water, or any other non-sanitary flows must be disconnected from the sanitary sewer. Installation of a sump pit is required to discharge the storm water onto the ground or make a direct connection to the storm sewer in the street.

A sewer ejector pump shall discharge all underfloor basement piping UP to the newly installed overhead piping in basement.

Required: Non-shear couplings, CA7 class 1A stone, SDR 26 D-3034 pipe (If within 10' of water service, D-2241 pipe – no glue-type fittings) and a full-sized cleanout 5' outside of building. (6" cleanout for existing 6" services, 4" cleanout for existing 4" service.)

I understand and agree that Fox Metro Water Reclamation District has established the Sanitary Sewer Overhead Assistance program (S.O.A.P.) to assist residents in protecting their home from flooding due to sewer backups during a heavy rain event.

Prior to the installation of any plumbing work, the all requested materials shall be submitted to Fox Metro for review and approval. No work shall commence until Fox Metro approval is obtained and a permit is issued. Fox Metro shall be notified to inspect the plumbing as required under any permit. All work to be done pursuant to the permit herein applied for, and shall be in strict conformity with all ordinances and regulations of the District and any other municipality within the corporate limits of which said work is done. A License and Permit Bond in the sum of \$25,000 issued by an acceptable insurance company is required.

Reimbursement of eligible items at approved amounts will be made after work is completed, inspected and approved by Fox Metro. A completed "Request for Disbursement" form must be completed and submitted with other documentation, such as the detailed invoice and a copy of the cancelled check (both sides) or credit card receipt which evidences that the project was paid for, in full, by the homeowner.

Liability – Fox Metro shall have no liability for any defective work or other damage, injury and/or loss on account of any act or omission of the Contractor in the performance of the work. The Homeowner shall make any claim for such matters directly against the Contractor or Contractor's insurance carrier. Homeowner hereby agrees to indemnify and hold Fox Metro harmless against any and all claims and further covenants not to sue Fox Metro for any and all claims, as no system is absolutely fail safe.

Disclaimer – The Program is designed to substantially reduce the risk of basement backups. However, there is always some risk of basement backup as a result of unexpected sewer collapse, obstruction, power failure, extreme environmental conditions or other unforeseen factors. Proper operation of foundation drains is necessary to prevent seepage of ground water through walls below grade. Existing foundation drains shall not be tested for proper operation in the SOAP—the Homeowner has the responsibility for all testing, inspections and any corrective work that may become necessary. (The homeowner is reminded that footing drains, storm water tiles and all perimeter drains must remain disconnected from the sanitary sewer system. Storm water/ground water discharges shall be disposed of properly.)

In addition, reliable continuous functioning of Homeowner's ejector pump(s) is necessary for overhead sewers, and sump pumps for foundation drains to function properly. The Homeowner shall have the responsibility to check the operation of the pumps regularly. The Homeowner shall have the responsibility for all testing, inspections and any corrective work that may become necessary for regular and periodic maintenance. It is further recommended that the Homeowner install a battery backup system to provide protection in the event of power failure. Costs of a battery backup system shall be eligible for funding as part of the program.

That the applicant shall restore all sewers, appurtenances, streets, alleys, sidewalks, pavements and / or structures disturbed by the work to as good of condition as the same existed at the time of commencement of said work and in accordance with any specifications and/or easement provision(s) of the Fox Metro Water Reclamation District. In case of any subsidence or settling of or other damage to any sewer, appurtenance, street, alley, sidewalk, pavement, or other structure caused by said work and/or occurring after its completion, applicant agrees, on demand of the District, forthwith at his sole expense is to make such repairs as are necessary to restore the same to the condition existing at the time of commencement of the work.

That applicant shall indemnify and save harmless the District from any and all loss, cost, damage, and expense which may come to the District by reason of or in any manner growing out of or connected with said work, including any and all liability for and on account of any accident or accidents, injury, death, damage or damages caused or in any manner arising from or growing out of or connected with said work: provided however, that the liability, if any of the applicant to the District shall not be limited to the District for any and all loss, cost, damage, and/or expense of every kind and character arising from, growing out of and/or connected with such work.

That in case of any suit, action or proceeding against the District for damages on or account of any liability or claim arising from, growing out of or in any way growing out of or in any way connected with said work, applicant shall, on demand of the District, enter his or its appearance therein, defend the same and pay all the costs, attorney's fees, solicitor's fees and expense thereof and the amount of any and all final judgments, decrees, and / or awards against the District entered or made therein.

Breach – If the Homeowner fails to comply with all requirements of this Agreement or to complete installation as provided in this Agreement, Fox Metro shall have no obligation to reimburse the Homeowner.

I understand and agree with all of the above statements and agree to comply accordingly.

A detailed sketch of the of exterior work is required.

Show:

- * Existing service
- * Area of repair
- * Cleanouts (new or existing)
- * Driveway/sidewalk
- * Grease trap
- * Trees/bushes

Street

Right of way/Property line

Sketch Area

The sketch area contains a diagram with several vertical lines. From left to right, there are two green lines, a blue line, a dashed blue line, another blue line, and a final green line. These lines represent different types of services or features as defined in the legend. The diagram is positioned between horizontal lines representing the 'Street' and 'Right of way/Property line'.

It is agreed and understood that this work must be inspected by Fox Metro Water Reclamation District prior to backfill. Applicant agrees to notify the District at least twenty-four hours prior to the desired inspection date and time. Owner may only perform work on their property. Work in the public right of way must be performed by contractor that is bonded with the District.

Homeowner Signature: _____ Permit Issued this _____ day of _____, 20 _____

Engineering Department Signature: _____

All work must be performed in strict compliance with O.S.H.A. safety regulations.

Office Use Only:

Date of Exterior Inspection: _____ Date of Interior Inspection: _____ Inspection Notes: _____

Date Request for Reimbursement Form Received _____ Proof of Payment Received _____

Copy of Paid and Itemized Invoice from Contractor Received _____

Dollar Amount of Reimbursement Approved _____

Check Number and Date _____