



**Southern Seven Health Department
Environmental Health Division
37 Rustic Campus Drive
Ullin, IL 62992
(618) 634-2297**

FEE SCHEDULE

CODE	FOOD PROGRAM	FEE	✓
P0001	Category I Permit	\$155.00	
P0002	Category II Permit	\$125.00	
P0003	Category III Permit	\$110.00	
PNONP	Non-Profit Permit (food service establishments operated by religious, voluntary or community service organizations). Proof of 501(c)3 required.	N/C	
PTEMP	Temporary Permit (2-14 day event) (Non-Profit: religious, voluntary or community service organizations are exempt)	\$75.00 (per stand)	
F0001	1 st Follow-Up Inspection	N/C (per insp.)	
F0002	2 nd Follow-Up Inspection	\$100.00	
F0003	3 rd Follow-Up Inspection	\$200.00	
L1000	Late Food Permit Fee (includes temporary)	\$50.00	
E1005	Plan Review of Construction	\$100.00	
E1007	Replace Lost Food Permit	\$10.00	
CODE	SEWAGE PROGRAM	FEE	✓
E1019	Private, Conventional Sewage Disposal System Permit	\$150.00	
E1021	Drip Trickle Sewage Disposal System Permit	\$250.00	
E1008	Contractor Registration	\$50.00	
E1027	Registration Late Payment Fee	\$25.00	
E1028	Subdivision Plat Review	\$150.00	
CODE	WATER PROGRAM	FEE	✓
N/A	Water Well Permit (Payable to IDPH)	\$100.00	
E1029	Water Well Sealing	\$100.00	
E1030	Closed Loop Well Permit (with first 10 boreholes)	\$100.00 \$10/add'l borehole	
E1031	Closed Loop Well Sealing Permit	\$100.00	
E1001	Water Test Kit (Pickup at Southern Seven)	\$20.00	
E1016	Water Test Collection (Onsite)	\$50.00	
RTNCK	Returned Check (A \$25 fee will be charged for all returned checks)	\$25.00	
<i>All permit fees shall be non-transferable and non-refundable once a permit has been issued by the Health Department.</i>			

RECEIPT

Client Name: _____ **Business Name:** _____

Address: _____ **Address:** _____

City: _____ **State:** _____ **Zip:** _____ **City:** _____ **State:** _____ **Zip:** _____

Total Charge: _____ **Permit Number:** _____

Amount Paid: _____ Cash Credit Card Check **Check Number:** _____

Inspector Signature: _____ **Date:** _____