

Telephone: (217) 253-4137 FAX: (217) 253-3421

**Douglas County Health Department** 

## 2025

## Private Sewage Disposal Contractor-Pumper License

## Please Print or Type

Company Name	
Address	
City, State, Zip Code	
Contractor Name	
EMAIL	
Office Phone ()	Cell Phone ()
Type of business (check each area that applies to you or your firm)	
( ) Contractor Installer	
( ) Manufacturer	
( ) Pumper	
( ) Service/maintenance only	
State of Illinois Contractor License Number	
Registr	ation Fee ()\$25.00