



City of Bloomington Utilities  
Application for Wastewater Connection Fee Waiver  
Abandoning Septic

Name of Applicant: (Please Print) \_\_\_\_\_

Mailing Address: (Street, City, State) \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Address: (Street, City, State) \_\_\_\_\_

Is this Property located within city limits? ☐ yes ☐ no

Was there an existing septic system currently located on this Property? ☐ yes ☐ no

Have you pumped the septic system? ☐ yes ☐ no

Name of Pumper: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you abandoned the septic system? ☐ yes ☐ no

Name of Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

I swear or affirm that the information provided herein is true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
DATE

*This Section is for City of Bloomington Utilities Department (CBU) Staff Only:*

Monroe County Health Department has sent written confirmation indicating that the septic system has been properly abandoned. ☐ yes ☐ no

One of the following Must be True in order to approve this application:

Property is located inside City Limits ☐ yes ☐ no

Property is located outside of City Limits but drains into City's MS4 ☐ yes ☐ no

I have reviewed and approve this application for waiver of sewer connection fee.

\_\_\_\_\_  
Signature of Kelsey Thetonia, CBU MS4 Coordinator

\_\_\_\_\_  
DATE

I have reviewed and approve this application for waiver of sewer connection fee.

\_\_\_\_\_  
Signature of Vic Kelson, CBU Director

\_\_\_\_\_  
DATE

Comments: \_\_\_\_\_