



DEPARTMENT OF PUBLIC HEALTH
CITY OF CHICAGO

FORM NO. CDPH.PRPTY.03 (STREETERVILLE - Private Property)

Notice is hereby given that the site you have requested a permit for is recorded with the City of Chicago Department of Public Health (CDPH) as potentially having environmental contamination on the site and adjacent right-of-way. This environmental contamination could present a threat to human health and safety in connection with work performed at the site, or in the adjacent right-of-way, if proper safeguards are not employed.

Review all environmental and other information regarding the worksite provided by CDPH. Additional information regarding the aforementioned environmental contamination is available for review at <https://www.epa.gov/lindsay-light>. This environmental information must be reviewed and the remainder of this form completed before the permit can be issued if the ground will be exposed or excavated. **Please note that for some locations, additional health and safety procedures may be required by law.**

Please complete the following:

I have reviewed and understand the documents, maintained by CDPH, regarding environmental contamination of the site and adjacent right-of-way. Further, I will ensure that all work at the subject site and adjacent right-of-way, and any monitoring required including but not limited to radiation monitoring, will be performed in a manner that is protective of human health and the environment and in compliance with all applicable local, state, and federal laws, rules, and regulations, especially those pertaining to worker safety and waste management. I will ensure that the results of any radiation monitoring and/or surveying conducted shall be provided to CDPH and the United States Environmental Protection Agency **within two (2) weeks of their completion**. If any elevated levels of radioactive material are detected, I will immediately contact CDPH at (312) 745-8332 and the United States Environmental Protection Agency at (800) 424-8802.

Applicant Name (print): _____ Signature: _____

Site Address and Work Location (Describe exact site location and attach map): _____

Nature of Work: _____

Company Name, Address, Phone No.: _____

General / Prime Contractor Name, Address, Phone No.: _____

Include subcontractor information if applicable

Safety Officer / Phone No. _____

Radiation Contractor / Phone No. (if applicable) _____

Check if City Department Work Department Name: _____

DOB Permit No. / 811 Chicago Dig Ticket No.: _____

Today's Date: _____ Expected Start Date: _____ CDPH Approval / Date _____

Please send this form with detailed drawings via e-mail to: radiation-monitoring@cityofchicago.org

For CDPH Use Only