

**ILLINOIS ASSOCIATION OF WASTEWATER AGENCIES
APPLICATION FOR MEMBERSHIP**

The undersigned hereby applies for membership in the Illinois Association of Wastewater Agencies:

AGENCY MEMBERSHIP

1. AGENCY NAME: _____

Street Address or P.O. Box _____

City _____ State _____ Zip _____

Telephone Number _____ Agency Fax Number _____

Agency Web Site Address _____

Billing Address and Contact Person (if invoice is to be sent to a different location) _____

County _____

2. TYPE OF AGENCY:

_____ City

_____ Regional

_____ Township

_____ Other

_____ County

_____ Sanitary District

(S.D. Act of _____)

_____ Village

Date Organized: _____

3. Does your Agency handle COLLECTION? _____ and/or TREATMENT? _____

4. **POPULATION SERVED:** _____ 5. ANNUAL AVERAGE FLOW: _____

6. DESIGNATED REPRESENTATIVE:

Name: _____

Title: _____

Address: _____

ALTERNATIVE REPRESENTATIVE:

Name: _____

Title: _____

Address: _____

If you would like your trustees, directors, or other contacts listed in our annual membership directory, please attach a separate sheet.

Signature _____ Date _____

(Please see back side of sheet for Dues Schedule)

DUES SCHEDULE
Effective 09/01/09

Population Served:

| | |
|------------------------|-------------|
| Less than 2,000 | \$396.00 |
| 2,000 to 4,999 | \$585.00 |
| 5,000 to 9,999 | \$784.00 |
| 10,000 to 14,999 | \$980.00 |
| 15,000 to 19,999 | \$1,144.00 |
| 20,000 to 24,999 | \$1,417.00 |
| 25,000 to 29,999 | \$1,459.00 |
| 30,000 to 34,999 | \$1,882.00 |
| 35,000 to 39,999 | \$2,093.00 |
| 40,000 to 44,999 | \$2,296.00 |
| 45,000 to 49,999 | \$2,618.00 |
| 50,000 to 59,999 | \$3,861.00 |
| 60,000 to 69,999 | \$4,274.00 |
| 70,000 to 79,999 | \$4,685.00 |
| 80,000 to 89,999 | \$5,094.00 |
| 90,000 to 99,999 | \$5,506.00 |
| 100,000 to 149,999 | \$6,065.00 |
| 150,000 to 199,999 | \$6,416.00 |
| 200,000 to 249,999 | \$7,166.00 |
| 250,000 to 299,999 | \$7,497.00 |
| 300,000 to 999,999 | \$8,825.00 |
| 1,000,000 to 1,999,999 | \$10,590.00 |
| 2,000,000 to 2,999,999 | \$12,355.00 |
| Over 3,000,000 | \$14,120.00 |

Complete and return with your check for annual dues to:

Illinois Association of Wastewater Agencies
241 North Fifth Street
Springfield, IL 62701