

**SEPTIC SYSTEM EASEMENT**

This Easement Agreement is made by and between the undersigned, \_\_\_\_\_  
\_\_\_\_\_ (Collectively "Grantors"),

who hereby grant/s and convey/s to \_\_\_\_\_  
\_\_\_\_\_ (Collectively "Grantees")

and their successors and assigns of the owners of

- Lot # \_\_\_\_\_ of the Plat of \_\_\_\_\_
- Address \_\_\_\_\_
- Other \_\_\_\_\_

as shown in the Records of the St. Joseph County, Indiana Recorder's Office the following described septic system Easement. Said Easement is an exclusive easement for

- Development of multiple lots into a single building site
- Perimeter drain outlet tile
- Future septic system
- Existing septic system
- Other \_\_\_\_\_

This Easement is for the purposes of and in order to allow for the approval of

- Subdivision of property \_\_\_\_\_
- Well and/or septic permit
- Other \_\_\_\_\_

This easement shall be allowed to be revised, enlarged or re-located only with the written approval of all the following parties, the owners of the property described in the easement, the owners of the above described \_\_\_\_\_

\_\_\_\_\_ and the St. Joseph County, Indiana Health Department.

The Easement is described as follows:

**LEGAL DESCRIPTION FOR SEPTIC SYSTEM EASEMENT:** (include plat of property/s detailing the easement)

A parcel of land located...

The Grantor/s represent and warrant to the Grantee/s and their successors and assign, that the Grantor is the true and lawful owner(s) of the property described in the Easement above and has the full right and power to grant and convey the rights conveyed herein.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Grantor: \_\_\_\_\_ Grantor: \_\_\_\_\_

Grantee \_\_\_\_\_ Grantee \_\_\_\_\_

State of Indiana  
ss:  
St. Joseph County

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared,

\_\_\_\_\_  
Grantor: \_\_\_\_\_ Grantor: \_\_\_\_\_

\_\_\_\_\_  
Grantee \_\_\_\_\_ Grantee \_\_\_\_\_

all who stated and acknowledged the execution of the foregoing document as their voluntary act and deed for the uses and purposes therein set forth

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission expires on \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed name \_\_\_\_\_ – Notary Public  
Resident of St. Joseph County, Indiana.