



DATE: _____ **PERMIT NO:** _____ **TAX KEY NUMBER:** _____

OWNER'S NAME: _____ **PHONE NUMBER:** _____

JOB SITE ADDRESS: _____

FIXTURES & CONNECTIONS

(NUMBER OF ITEMS THAT APPLY)

- | | | |
|------------------------|---------------------|------------------------|
| _____ Water Closets | _____ Water Heaters | _____ Garbage Disposal |
| _____ Bath Tubs | _____ Dishwasher | _____ Catch Basin |
| _____ Sinks | _____ Urinals | _____ Bar Connection |
| _____ Laundry Trays | _____ Showers | _____ Water Softener |
| _____ Floor Drains | _____ Storm Sump | _____ Other |
| _____ Wash Basin | _____ Sanitary sump | _____ Sill Cocks |
| _____ Wash Machine Box | | |

# _____ of fixtures @ \$17.60 per fixture	
Connection to main sewer, holding tank/mound \$96.80 plus \$.73 per ft. for each ft. over 100 ft.	
Storm sewer installation \$96.80 plus \$.73 per ft. for each ft. over 100 ft.	
Building sewer abandonment @ \$72.60	
Septic tank abandonment @ \$84.70	
Well abandonment or registration @ \$84.70	
Sanitary building drain @ \$96.80 plus \$.73 for each ft. over 100 ft.	
Storm building drain @ \$96.80 plus \$.73 for each ft. over 100 ft. (COMMERICAL ONLY)	
TOTAL PERMIT FEE:	
TOTAL ESTIMATED JOB COST:	

RE-INSPECTION FEE: \$151.80

MINIMUM FEE: \$72.60

ALL FEES EFFECTIVE JANUARY 2009

It is hereby agreed between the undersigned (as owner or agent) and they the Village of Sturtevant, that for and in consideration of the premises and of the permit for the execution of plumbing installation for pipes, drain, fixtures, etc. as above described, to be issued and granted by the inspector of buildings, that the work will be done in accordance with the descriptions set forth in this statement, and it is further agreed to alter or install same in strict compliance with the Ordinances of the Village of Sturtevant, with Wisconsin Statutes and Administrative Code, and to obey any and all lawful orders of the Plumbing Inspector of the Village of Sturtevant. Inspections shall be one trip for the rough, and final, and building service, with one re-inspection if needed. Additional trips, the re-inspection fee will apply per trip. To **schedule inspections call (262) 886-7201.**

CONTRACTOR CREDENTIAL# _____ **MP LICENSE#** _____

COMPANY NAME: _____ **PHONE:** _____

BUSINESS ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP CODE:** _____

APPLICANTS SIGNATURE: _____

APPROVED BY: _____ **DATE:** _____

PLUMBING INSPECTOR

rev Jul 09