TOWN of WAYNE

6030 Mohawk Road Campbellsport, WI 53010 Ph 262-626-4818

UNIFORM PLUMBING PERMIT Application

Pei	rmi	t #
Tax	ι Ke	v #

ommercial	
ne and Two Family	П

Mailing Address	Phone # with area code	
	Phone # with area code	
Contractor's Mailing Address	Phone # with area code	
Contractor's email or Fax # with area code		
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SCHEDULE OF INSPECTION FEES

NEW 1 & 2 FAMILY O	NLY						FEE
Base Fee				\$50.00		\$50.00	
Plus\$.05/Sq. Ft <mark>. </mark>	or All Area	s Including B	asement a	<mark>ind Garage</mark> Sq. F	-t.	\$	
· · · <u>-</u>						Total \$	
COMMERCIAL, ADDI	TIONS, REPI	LACEMENTS,	MODIFICA	ATIONS AND MISCELLANEOUS !			
*	EACH	QUANTITY	FEE		EACH	QUANTITY	FEE
1. Automatic Washer	\$8.00			21. Hot Tub, Spa, Whirlpool	\$12.00		
2. Sink	\$8.00			22. High Pressure Boiler	\$25.00		
3. Dishwasher	\$8.00			23. Other Fixtures Not Listed	\$8.00		
4. Garbage Disposal	\$8.00			24. Sanitary Building Drain			
5. Water Closet	\$8.00			First 75 Feet	\$25.00		
6. Shower	\$8.00			Over 75 Feet	\$.35/Ft.		
7. Lavatory	\$8.00			25. Storm Building Drain			
8. Laundry Tray	\$8.00			First 75 Feet	\$25.00		
9. Urinal	\$8.00			Over 75 Feet	\$.35/Ft.		
10. Bath Tub	\$8.00			28. Water Service			
11. Drinking Fountain	\$8.00			First 100 Ft. Lateral	\$25.00		
12. Floor Drain	\$8.00			Over 100 Ft. Lateral	\$.35/Ft.		
13. Sill cock/Hose bib	\$8.00			29. Sanitary Building Sewer			
14. Water Heater	\$8.00			First 100 Ft. Lateral	\$25.00		
15. Wash Fountain	\$8.00			Over 100 Ft. Lateral	\$.35/Ft.		
16. Sump Pump	\$8.00			30. Storm Building Sewer			
17. Ejectors or Pumps	\$8.00			First 100 Ft. Lateral	\$25.00		
18. Water Softener	\$8.00			Over 100 Ft. Lateral	\$.35/Ft.		
19. Iron Filter/Water Cond.	\$8.00			31. Extension of House Drain Where Fixtures Already installed	\$25.00		
20. Backflow Prevent. Dev.	\$8.00			Total 1 throu	ıgh 31=	\$	

Double fee will be charged if work started without permit

Base Permit Fee + \$50.00

Reinspection may be charged a reinspection fee of \$50

TOTAL \$

All work must be inspected before concealing in walls, floors, or ceilings.

Building Inspector	The applicant agrees to comply with the Municipal Ordinances, State of WI Building and Plumbing Codes, and					
Jeremy Pfeifer	with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all of the above information is accurate. Make check payable to Town of Wayne. Mail check and application to Town.					
Cert. #: 1293974						
Office: 262-629-1774						
Cell: 262-689-7346	Have address and permit # if available when requesting an inspection. Call the office or cell phor					
Email:	# to request an inspection. Please give at least 24 hour notice for inspections.					
jeremy@jpbuildinginspections.com						
Signature of Applicant (Plumbe	Date					