

VILLAGE OF BROWN DEER
 4800 W. Green Brook Drive
 Brown Deer, WI 53223
 Phone (414) 371-3030
 FAX (414) 371-3045

**PLUMBING PERMIT
 APPLICATION**

Permit No. _____

PROJECT LOCATION: _____

PROJECT DESCRIPTION: _____

___ 1 & 2 FAMILY ___ MULTI-FAMILY ___ COMMERCIAL

ESTIMATED COST OF JOB
 \$ _____

OWNER'S NAME _____ MAILING ADDRESS _____ TELEPHONE (Include Area Code) _____

PLUMBING CONTRACTOR _____ TELEPHONE (Include Area Code) _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

BONDING INSURANCE CO. _____ MASTER PLUMBER'S NAME _____ MASTER PLUMBER CREDENTIAL # _____

**SCHEDULE OF INSPECTION FEES
 NEW PLUMBING, REPLACEMENT AND MODIFICATIONS OF EQUIPMENT AND MISCELLANEOUS ITEMS**

	COUNT	EACH	FEE		COUNT	EACH	FEE
1. Automatic Washer	_____	6.00	_____	26. Sanitary Building Drain	_____		
2. Backflow Preventor	_____	6.00	_____	First 100 Feet	_____	30.00	_____
3. Bath Tub	_____	6.00	_____	Over 100 Feet	_____	.35/ft.	_____
4. Dishwasher	_____	6.00	_____	27. Storm Building Drain	_____		
5. Drinking Fountain	_____	6.00	_____	First 100 Feet	_____	30.00	_____
6. Ejectors or Pump	_____	6.00	_____	Over 100 Feet	_____	.35/ft.	_____
7. Floor Drain	_____	6.00	_____	28. Manhole	_____	10.00	_____
8. Garbage Grinder	_____	6.00	_____	29. Catch Basin	_____	10.00	_____
9. Grease Trap	_____	6.00	_____	30. Water Service	_____		
10. Hose Bibb	_____	6.00	_____	First 100 Ft. Lateral	_____	30.00	_____
11. Laundry Tray	_____	6.00	_____	Over 100 Ft. Lateral	_____	.35/ft.	_____
12. Lavatory	_____	6.00	_____	31. Sanitary Building Sewer	_____		
13. Shower	_____	6.00	_____	First 100 Ft. Lateral	_____	30.00	_____
14. Sink	_____	6.00	_____	Over 100 Ft. Lateral	_____	.35/ft.	_____
15. Site Drain	_____	6.00	_____	32. Storm Building Sewer	_____		
16. Slop Sink	_____	6.00	_____	First 100 Ft. Lateral	_____	30.00	_____
17. Storm Sewer Conductor	_____	6.00	_____	Over 100 Ft. Lateral	_____	.35/ft.	_____
18. Sump Pump	_____	6.00	_____	33. Roughing in of Fixtures	_____	5.00	_____
19. Urinal	_____	6.00	_____	34. Residential Fire Sprinkler Systems	_____	30.00	_____
20. Wash Fountain	_____	6.00	_____	35. Other Fixtures	_____	6.00	_____
21. Water Closet	_____	6.00	_____	_____	_____	_____	_____
22. Water Heater	_____			_____	_____	_____	_____
Gas	_____	6.00	_____	_____	_____	_____	_____
Electric	_____	6.00	_____	_____	_____	_____	_____
23. Water Softener	_____	6.00	_____	MINIMUM PERMIT FEE	_____	50.00	_____
24. Water Treatment Device	_____	6.00	_____	REINSPECTION FEE	_____	50.00	_____
25. Whirlpool	_____	10.00	_____	FAILURE TO CALL FOR INSPECTION	_____	50.00	_____

TOTAL PERMIT FEE: \$ _____

DOUBLE FEES ARE DUE IF WORK IS STARTED BEFORE PERMIT IS ISSUED

Revised Jan. 2004

THE APPLICANT AGREES TO COMPLY WITH ALL MUNICIPAL ORDINANCES AND WITH THE CONDITIONS OF THIS PERMIT, UNDERSTANDS THAT THE ISSUANCE OF THE PERMIT CREATES NO LEGAL LIABILITY, EXPRESS OR IMPLIED, OF THE DEPARTMENT, MUNICIPALITY, AGENCY OR INSPECTOR, AND CERTIFIES THAT ALL THE ABOVE INFORMATION IS ACCURATE. FAILURE TO COMPLY MAY RESULT IN SUSPENSION OR REVOCATION OF THIS PERMIT OR OTHER PENALTY. PLUMBING PLANS AND SPECIFICATIONS OF THE FIXTURES TO BE INSTALLED IN A NEW OR REMODELED BUILDING SHALL BE SUBMITTED WITH THIS APPLICATION IN ACCORDANCE WITH COMM. 82.20 OF THE STATE OF WISCONSIN PLUMBING CODE. FINAL INSPECTIONS ARE MANDATORY. PLEASE HAVE PERMIT NUMBER AND ADDRESS WHEN REQUESTING INSPECTIONS. PLEASE GIVE AT LEAST 24 HOURS NOTICE.

SIGNATURE OF PLUMBER _____

DATE: _____