TOWN OF HARTFORD 3360 Co. Rd. K Hartford, WI 53027 Phone (262)673-7214	UNIFORM PLUMBING PERMIT Application	Permit # Tax Key # One and Two Family Commercial	
Project Location			
Owners Name	Mailing Address	Phone # with area code	
<u>Contractor's Name</u>	Contractor's Mailing Address	Phone # with area code	
DSPS MP #	Contractor's email or Fax # with area	code	
Project Description:	· · · · ·		

Fixture	Qty		QTY	FEE	Total
1. Automatic Washer		TOTAL # OF FIXTURES		\$8 each	
2. Sink		25. Fire Suppression System			
3. Dishwasher		26. Grease Interceptor		\$25	
I. Garbage Disposal		27. Sanitary Building Drain- first 75'		\$25	
5. Water Closet		\$.35/ft over 75' (max \$200)		\$	
6. Shower		28. Water Lateral/ Supply		\$25	
7. Lavatory		29. Sanitary Sewer Lateral- First 100'		\$25	
8. Laundry Tray		\$.35/ft over 100' (max \$200)		\$	
. Urinal		30. Storm Sewer Lateral- First 100'		\$25	
0. Bath Tub		\$.35/ft over 100' (max \$200)		\$	
1. Drinking Fountain		SUBTOTAL			\$
2. Floor Drain					·
3. Sill cock/Hose bib		+BASE FEE			+ \$50
4. Water Heater					
5. Wash Fountain		TOTAL PERMIT FEE		\$	
7. Ejectors or Pumps					Y
8. Water Softener		Double Fee for work started without a permit			
9. Iron Filter/Water Cond.		Re-Inspection fee			\$50
0. Backflow Prevent. Dev.					
. water Heater					
. Hot Tub, Spa, whirlpool					
3. Boiler					
24. Misc not listed					

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

Building Inspector Jeremy Pfeifer Office: 262-629-1774 Cell: 262-689-7346 Email: jeremy@jpbuildinginspections.com	The applicant agrees to comply with the Municipal Ordinances, State of WI Building and Plumbing Codes, and 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 Hartford. Mail check and application to Town or drop off at Town Hall during business hours or in drop box near entrance. Have address and permit # if available when requesting an inspection. Call the office or cell phone # to request an inspection. Please give at least 24 hour notice for inspections.				
Signature of Applicant (Plumber)		Date			
Approved//					