



7511 12th St | PO Box 197 Somers, WI 53171

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Inspections by appointment

APPLICATION FOR PLUMBING PERMIT

Job Address: _____ Phone #: _____

Property Owners: _____ Email: _____

COST OF PROJECT: _____

Occupancy Type:	One & Two Family	Multi-Family	Commercial	Industrial
Type of Work:	New Construction	Addition	Alteration	Repair/Replace

- | | | |
|------------------------|--------------------------------|-------------------------------|
| Automatic Washer _____ | Water Meter Connection _____ | Dishwasher _____ |
| Bar Sink _____ | Hose Bibbs B.F.P. _____ | Garbage Disposal _____ |
| Bath Tub _____ | Conductors (Roof Drains) _____ | Stack Connections _____ |
| Shower Stall _____ | Mop or Service Sink _____ | Water Softener _____ |
| Sinks _____ | Funnel Connections _____ | Laundry Tray _____ |
| Water Closets _____ | Floor Drains _____ | Grease Trap _____ |
| Urinal _____ | Sumps _____ | Pump & Fill Septic Tank _____ |
| Catch Basins _____ | Sewage Ejector _____ | Water Heater _____ |
| Area Drains _____ | Wash Fountain _____ | Drinking Fountain _____ |
| Well Pump _____ | Well Pressure Tank _____ | Other _____ |

Total Fixtures _____ @\$10 per fixture

Sewer Lateral \$65 plus \$.50 per ft for each ft over 100 ft	ft	\$ _____
Storm Sewer \$65 plus \$.50 per ft for each ft over 100 ft	ft	\$ _____
Sanitary Building Drain \$65 plus \$.50 per ft for each ft over 100 ft	ft	\$ _____
Water Service Lateral \$65 plus \$.50 per ft for each ft over 100 ft	ft	\$ _____
New Well Installation	\$65.00	\$ _____
Well Abandonment	\$65.00	\$ _____
Well Registration Program	\$35.00	\$ _____
Cap water or sewer	\$15.00 ea	\$ _____
Holding Tank	\$50.00 ea	\$ _____
Fire Sprinkler Connection	\$15.00 ea	\$ _____
Boiler B.F.P.	\$15.00 ea	\$ _____
Certified Plumbing Inspection Fee	\$65.00 ea	\$ _____
Re-Inspection Fee	\$75.00 ea	\$ _____
Water Meter Horn	\$170 for 3/4", \$245 for 1"	\$ _____
MINIMUM PERMIT FEE \$65.00	Total	\$ _____

DESCRIPTION OF WORK _____

In the performance of this work, the undersigned owner (or his/her agent) of said job address, and his/her authorized plumber, hereby agrees to be bound by all statutes of the State of Wisconsin, and all ordinances, rules and regulations prescribed by the Building Department and Plumbing Inspector of the Village of Somers

Master Plumber: _____	Tax Key: _____
Address _____	Plumbing Inspector: _____
License # _____	Expiration Date: _____
Plumbing Contractor: _____	eMail: _____