TOWN of SUGAR CREEK

N6641 County Rd. H • P.O. Box 287 • Elkhorn, WI 53121 Phone: (262) 742-3383 • Fax: (262) 742-4476

For **Building Inspection** call (262) 366-2400

PLUMBING Permit Application	PROJECT LOCATION (Building Location)	
	PROJECT	

				PROJECT DESCRIPTION	☐ Commercial	0	ne & Two Family
OWNER'S NAME		MAIL	ING ADDRESS - IN	NCLUDE CITY & ZIP	TELE	PHONE - INCLUDE AREA C	CODE
CONTRACTOR'S NAME		MAIL	ING ADDRESS - IN	NCLUDE CITY & ZIP	TELI	EPHONE - INCLUDE AREA C	CODE
ESTMATED COST	BONDI	BONDING INSURANCE COMPANY				E NUMBER	
		SCHEDI	II E OE	INSPECTION FE	FS		
NEW BUILDING	INOTEO HONTE	EACH	COUNT	FEE			
ADDITIONS,	Base Fee	•••••			\$55.00		
REMODELING	Fee			.05/sq. ft. for all areas	sq. ft.		
	REPLACE	MENT, MO	DIFICATI	ONS & MISCELLAN	EOUS ITEMS		
	EACH	COUNT	FEE			EACH COUNT	FEE
1. Automatic Washer 2. Sink/Dishwasher 3. Garbage Grinder 4. Water Closet/Urinal 5. Shower/Lavatory 6. Laundry Tray 7. Bath Tub 8. Hot Tub/Spa/Whirlpool 9. High Pressure Boiler 10. Drinking Fountain 11. Floor Drain/Sight Drain 12. Sillcock 13. Water Heater 14. Wash Fountain 15. Sump Pump 16. Ejectors or Pump	\$6.00 \$6.00 \$6.00 \$6.00 \$6.00 \$10.00 \$25.00 \$6.00 \$6.00 \$6.00 \$6.00 \$6.00 \$6.00			25. Fire Suppression Systems Restaurant Stoves/Frye 26. Sanitary Building Drain First 75 Feet Over 75 Feet 27. Storm Building Drain First 75 Feet Over 75 Feet 28. Manhole 29. Catch Basin 30. Water Service First 100 ft. Lateral Over 100 ft. Lateral 31. Sanitary Building Sewer First 100 ft. Lateral Over 100 ft. Lateral	ers/Boilers	\$15.00 \$55.00 \$.035 per ft \$15.00 \$.035 per ft \$10.00 \$60.00 \$.035 per ft \$55.00 \$.035 per ft	
 17. Water Softener 18. Storm Sewer Conductor 19. Backflow Prevention Device 20. Plan Review 21. Sprinkler Heads (.10¢ each) Minimum 22. Fire Hose Rack 23. Fire Department Connection 24. Hydrant 	\$6.00 \$6.00 \$15.00 \$15.00 \$6.00 \$6.00			32. Storm Building Sewer First 100 ft. Lateral Over 100 ft. Lateral 33. Extension of House Drain Where Fixtures Already Installed 34. Septic Abandonment 35. Other		\$55.00 \$.035 per /t. \$25.00 \$35.00 \$25.00	
The applicant agrees to comply with the the Department, Municipality, Agency or Call 262-366-2400. Give at least 24 hou	Re-Insp Failure DO Municipal Ordinance Inspector; and certifi	to Call for In OUBLE FEES Al es and with the co	spection RE DUE IF WO	DRK IS STARTED BEFORE PER permit; understands that the issuar is accurate. Have Permit/Applicatio	\$55.00/each \$55.00/each MIT IS ISSUED.	Please inc self-addressed with two (2) first- for permit s no legal liability, express when requesting inspection	envelope, -class stamps return. or implied, of

Signature of Applicant

Signature of Applicant		Date			
FEES:	RECEIPT	PERMIT EXPIRATION:	PERMIT ISSUED BY MUNICIPAL AGENT:		
nspection Fee	Ck # Date From Rec. By	Permit Expires 90 Days from date unless otherwise noted below	Name Date Certification No	_	
	1100.07				