

Town of Saukville

3762 Lakeland Rd

Saukville, WI 53080

Phone: (262) 675-2217

Fax:

Plumbing Inspector: Walt Grotelueschen

Office Hours:

Inspection Hours:

Email: clerk@town.saukville.wi.us

Website: <http://www.town.saukville.wi.us/Forms/PlumbingPermit.pdf>

Additional important contacts:

Street Work:

Jon Edgren – Hwy Dept (262) 238-8331

Water Service:

TOWN OF SAUKVILLE

PLUMBING PERMIT

3762 LAKELAND ROAD
SAUKVILLE, WISCONSIN 53080

Permit Number _____

Tax Key Number _____

Date _____

JOB ADDRESS _____

OWNER'S NAME _____ TELEPHONE () _____

CONTRACTOR _____ TELEPHONE () _____

ADDRESS/CITY/ZIPCODE _____

MASTER PLUMBER LICENSE # _____

RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL _____

PLUMBING ITEMS	QTY	AMT. EACH	FEE
1. Sink (Lav/Kitchen/Bar)		7.00	
2. Bath Tub/Shower		7.00	
3. Spa, Jacuzzi, Whirlpool, etc.		7.00	
4. Toilet/Urinal		7.00	
5. Laundry Tub		7.00	
6. Floor Drain		7.00	
7. Drinking Fountain		7.00	
8. Dishwasher/Washer Connection		7.00	
9. Garbage Disposal		7.00	
10. Back Flow Devices		7.00	
11. Sump Pump/Sanitary Sump Crock		7.00	
12. Hose Bib		7.00	
13. Water Softener		7.00	
14. Water Treatment Device		7.00	
15. Water Meter		7.00	
16. Water Heater (Gas or Electric)		7.00	
17. Well Connection (Inside Connection to Pressure Tank		7.00	
18. DOUBLE FEE FOR WORK DONE BEFORE PERMIT			
19. BASE FEE (In addition to item amounts above)		25.00	+25.00
TOTAL PERMIT FEE			\$

This permit issued by the Plumbing Inspector's office of the Town of Saukville to construct, erect, alter or install as described. The work must be done in accordance with the description herein set forth and more fully described in the specifications and plans herewith filed and in strict compliance with the Plumbing Ordinances of the Town of Saukville and the State Plumbing Code. All lawful orders of the Plumbing Inspector made or issued by virtue of the provisions of said ordinances must be obeyed and **all work must be inspected.** In the event a re-inspection is necessary, a \$50.00 fee will be charged for each re-inspection. **ALL WORK MUST BE INSPECTED BY THE BUILDING INSPECTOR. CALL WALT AT 262-675-0909 FOR INSPECTIONS.**

SIGNATURE OF APPLICANT _____ DATE _____

FOR OFFICE USE:

RECEIVED DATE _____ RECEIPT # _____ AMOUNT PAID _____

White - Inspector/File Copy

Building Inspector: (262) 675-0909

Yellow - Town Copy

Fax: (262) 675-0909

Pink - Owner Copy

Town: (262) 675-9217 Fax: (262) 675-0604

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