

# Village of Newburg

614 Main St PO Box 50

Newburg, WI 53060

Phone: (262) 675-2160

Fax: (262) 675-2287

Plumbing Inspector: Walter Grotelueschen

Office Hours: 7:00am – 5:00pm

Inspection Hours: 7:00am – 5:00pm

Notice Required for Inspection: 4 hours

Email: [villagehall@village.newburg.wi.us](mailto:villagehall@village.newburg.wi.us)

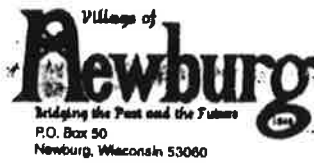
Website: <http://www.village.newburg.wi.us/>

*Additional important contacts:*

*Street Work:*

*Water Service:*

PLUMBING PERMIT  
APPLICATION



PLUMBING PERMIT  
FEES

DATE \_\_\_\_\_, 20\_\_\_\_ PERMIT # \_\_\_\_\_ U.D.C. PERMIT # \_\_\_\_\_  
 OWNER \_\_\_\_\_ PHONE # \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 LOT # \_\_\_\_\_ BLOCK# \_\_\_\_\_ SUBDIVISION \_\_\_\_\_  
 PROJECT ADDRESS \_\_\_\_\_  
 CONTRACTOR \_\_\_\_\_ NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 LIC/CERTIFICATION # \_\_\_\_\_ DATE \_\_\_\_\_, 20\_\_\_\_ PHONE # \_\_\_\_\_  
 PROJECT COST \$ \_\_\_\_\_ SQ. FT. HOUSE \_\_\_\_\_ SQ. FT. GARAGE \_\_\_\_\_

DRAIN OR WATER CONNECTIONS CONSISTING OF

WATER CLOSETS	NO. _____	x \$ 6.00	<u>2.50</u>		
BATH TUBS	NO. _____	x \$ 6.00			
WASH BASINS	NO. _____	x \$ 6.00		INSIDE SEWER	
KITCHEN SINKS	NO. _____	x \$ 6.00		FIRST 100 FEET	\$ 40.00
LAUNDRY TUBS	NO. _____	x \$ 6.00			
FLOOR DRAINS	NO. _____	x \$ 6.00		OUT SIDE SEWER	
URINALS	NO. _____	x \$ 6.00		FIRST 100 FEET	\$ 40.00
SHOWER STALLS	NO. _____	x \$ 6.00			
BUBBLERS	NO. _____	x \$ 6.00		WATER TAP OR SEWER	
BAR WASTE	NO. _____	x \$ 6.00		CONNECTION IN ROADWAY	\$ 25.00
HOSE BIBBS	NO. _____	x \$ 6.00			
DISHWASHER	NO. _____	x \$ 6.00		STREET OPENING AND BLACKTOP	
				REPAIRS	\$ 200.00
WATER HEATERS	NO. _____	x \$ 6.00			
SUMP PUMPS	NO. _____	x \$ 6.00		REINSPECTION CHARGES	\$ 25.00
WATER SOFTENERS	NO. _____	x \$ 6.00			
SANITARY PIT	NO. _____	x \$ 6.00		BASE FEE	\$ 30.00
WATER PURIFIERS	NO. _____	x \$ 6.00			
TOTALS	NO. _____	\$ _____			\$ _____
TOTAL FEE CHARGED					\$ _____

IN THE PERFORMANCE OF THIS WORK THE UNDERSIGNED OWNER (OR HIS AUTHORIZED AGENT) OF SAID PREMISES AND HIS AUTHORIZED PLUMER HEREBY AGREES TO BE BOUNDED BY AND SUBMIT TO ALL STATUTES OF THE STATE OF WISCONSIN AND THE STATE PLUMBING CODES.

ONLY STATE LICENSE PLUMBERS MAY OBTAIN A PLUMBING PERMIT AND PERFORM WORK AS DESCRIBED ABOVE.

**NOTE: IF PLUMBING WORK IS COMMENCED BEFORE THE PERMIT HAS BEEN OBTAINED, THE FEES SHALL BE DOUBLED WITH NO EXCEPTIONS!!**

CONDITIONS: \_\_\_\_\_

DATE: \_\_\_\_\_, 20\_\_\_\_ SIGNATURE OF APPLICANT \_\_\_\_\_

PERMIT PAID BY \_\_\_\_\_ DATE \_\_\_\_\_, 20\_\_\_\_