

VILLAGE OF
OLIVER

SEWER LATERAL PERMIT/CONNECTION CHARGE

Owner Information

Name: _____

Mailing Address: _____

Phone: _____

Property Address: _____

Contractor Information

Name: _____

Phone: _____

Plumber Information

Name: _____

Phone: _____

Date of Installation: _____ **Date Service is requested:** _____

Zoning Permit No.: _____

Parcel No.: _____

Lot No(s): _____

***All laterals shall be installed per the Wisconsin Administrative Code, Wisconsin State Statutes, and the Village of Oliver Sewer Ordinances. ***

Owner Signature: _____ **Date:** _____

Contractor Signature: _____ **Date:** _____

Connection Charge \$ 1550.00 Check No. _____ Date _____ Rec. By _____

(This charge equals a \$610.00 Village charge plus a \$940.00 Western Lake Superior Sanitary District charge.)