Town of Fond du Lac
Wisconsin

Sanitary District Application
Water Connection Application
Well Permit Application

Address of Project:

Parcel#:

Permit # *(For office use only)*

Sanitary District #_____

Amount Paid $

Property Owner and/or Billing Information:

Name:

Address:

Email (if desired):

Day Phone: | Evening Phone:

Building Type and/or Use: (check only one)

Building Type: ☐ Multifamily ☐ Condominium ☐ Commercial/Industrial ☐ Dwelling-1 or 2 Family House ☐ Accessory Structure

Occupancy Type: ☐ Owner Occupied ☐ Rental Occupied

Names of the Contractors Performing the Work: (List All That Apply)

Contractor Credential Requirements: All contractors shall possess an appropriate credential issued by the Wisconsin Division of Industry Services. Contractors are also required to only subcontract with contractors that hold appropriate contractor credentials.

Excavating Contractor:	Phone:
Utility Contractor #:	Contact Person:
Pipe Layer / Master Plumber / Master Plumber Restricted Service #:	Name of Credential Holder:
Plumbing Contractor:	Phone:
Master Plumber License #:	Contact Person:
Well Driller:	Phone:
License #:	Contact Person:

Sanitary District Connection where work is being performed: (check only one)

☐ **Sanitary District # 2 =** Connection permit required, contact townsd2@gmail.com or Brian 920-960-0732 / Well permit required

☐ **Sanitary District # 3 =** Sewer connection & meter fee **$410.00** / sdbilling@miclnk.com
- ☐ Town of Fond du Lac Water Service Area connection permit required if present, contact billingclerk@nfdl.org or 920-929-3765
- ☐ No water service available to parcel at this time, well permit required

☐ **Sanitary District # 4 =**Connection permit required, contact tsd4fdl@gmail.com or Joan 920-579-0836 / Well permit required

☐ **Sanitary District # 6 =** Sewer connection meter fee **$400.00** / sdbilling@miclnk.com / Well permit required

☐ **Private Onsite Wastewater Treatment System** (POWTS), contact Fond du Lac County Code.Enforcement@fdlco.wi.gov

Amount Due This Section: $_____

Well Permit Information (if applicable)

☐ **New Well**: ☐ Drilled: Estimated depth _____ ft ☐ Sand Point Diameter of Well _____ Inches

☐ **Redrill Well:** ☐ Drilled: Estimated depth _____ ft ☐ Sand Point Diameter of Well _____ Inches

Reason for Redrill: ☐ Contaminated ☐ Lowered water level ☐ Other: _____

☐ **Repair existing well:** description of repair: _____

☐ **Well Abandonment:** Must provide DNR well abandonment form upon completion

☐ **Well Permit Fee: $50.00** **Amount Due This Section: $_____**

** Signature required on page 2 **

Town of Fond du Lac Water Connection: (if applicable)

☐ Connect to an existing water lateral provided in the Right-of-way

☐ Install a new water tap-in to the water main with curb stop *additional fees may be required

Town Fees

☐ Commercial connection $150.00	☐ Residential connection $70.00
☐ Town water main assessment $500.00	☐ Inspection Fee Residential $250.00
☐ Water Meter Installation $100.00	☐ Inspection Fee Commercial $400.00 *additional fees may be required based on the site

Amount Due This Section: $_____

☐ Town of Fond du Lac Water Connection Permit fee **$85.00**- Check payable to the Village of North Fond du Lac

Sanitary District & Well Requirements

* All work must be done in conformance with the Wisconsin State Plumbing Code, Sanitary Districts requirements, Wisconsin DNR, and Town of Fond du Lac Ordinances. Additional permits required from those governing bodies are the applicant's responsibility to obtain.

* Sanitary District Ordinances **require the use of Schedule 40 PVC pipe** for all lateral installations.

* The sewer lateral and building connection must be inspected with the proper test prior to backfilling.

* A water meter will be installed if one is required by the Sanitary District.

* Clear water connections such as but not limited to sump pumps & roof drains are prohibited.

* The installer must provide a 2-working day notice to the inspector prior to the installation & connection of.

* Provide the districts Plumbing Inspector access to the property for the purpose of inspection, observation, and enforcement of the Districts Ordinances

* All Sanitary District permits will expire after 90 days of the issuance date if this work has not taken place.

Failure to conform to any of these requirements are subject to daily fines and prosecution under those Sanitary Districts Ordinances and this permit will be void.

Wetlands Notice to Permit Applicants: You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural resources wetlands identification web page or contact a Department of Natural Resources service center.

The applicant agrees to comply with the Sanitary District & Well requirements noted above, and all other applicable codes and municipal ordinances and with the conditions of this permit. The applicant understands that the issuance of the permit creates no legal liability, express or implied, on the Inspection Agency or municipality: and certifies that the information is true and accurate. The applicant agrees to allow the inspection and access to the property for the inspection of this permit. In granting this approval, the Town of Fond du Lac reserves the right to require changes or additions should conditions arise, making them necessary for code compliance.

Applicant Signature agrees to the terms of this Permit Application: (Sign Below)

Primary Applicant: □ Owner □ Contractor □ Other: _____

Primary Applicant Name (Print): _____ Phone: _____

Primary Applicant Signature: _____ Date: _____

The primary applicant is responsible for calling and scheduling all inspections to close out the permit once work is complete.

For Office Use Only:	Water Meter #: _____	Date Issued Meter: _____
	New ERT #: _____	Date Installed: _____