Nick Thill, Residential Building Inspector
262-277-1328 / anchorinspectionllc@gmail.com
Town of Port Washington
3715 Highland Dr, Port Washington WI 53074
townofportwashingtonwi.gov

Permit # _____

Date: _____

Tax Key # _____ (Required)

PLUMBING PERMIT

Owner _____ Contractor _____

Job Address _____ Contractor Address _____

_____ _____

Residential Commercial Industrial (circle one) Phone # _____

MP# _____

NEW CONSTRUCTION

Sinks _____	Floor Drains_____	Garbage Disposal_____
Wash Basins_____	Sanitary Bubbler_____	Bar Connection_____
Bath Tubs/Spas_____	Dish Washer_____	Sump Pump_____
Water Closets_____	Urinals_____	Sanitary Pump_____
Laundry Tubs_____	Showers_____	Hose Bibs_____
Water Heater_____	Well Connections_____	Water Filters_____
Water Softener_____	Catch Basin_____	Other_____

REPLACEMENT

WATER HEATER	WATER SOFTENER
_____ GAS-$50	_____ $50
_____ ELECTRIC-$50	OTHER_____

TOTAL NEW FIXTURES	
@ $8-each	
INSIDE SEWER FEE	$20.00
BASE PERMIT FEE	$50.00
TOTAL PERMIT FEE:	

Sprinkler System: $0.30/ per head
$30 for Main, first 100 ft.

ALL FEES PAYABLE TO: TOWN OF PORT WASHINGTON

It is hereby agreed between the undersigned, as owner, and their agent, and the Town of Port Washington, that in consideration of the issuance of a permit for the installation of plumbing work as described above, to be issued and granted by the Plumbing Inspector, that the work done thereon will be done in accordance with the Ordinances of the Town of Port Washington and State Plumbing Code, and that all lawful orders of the Plumbing Inspector will be complied with. In the event of a re-inspection is necessary, a $50 fee will be charged for each re-inspection. All fees must be paid before occupancy permit is issued.

APPLICANT/AGENT_____ SIGNATURE _____

Please return one signed copy to Town Clerk or Building Inspector, and retain one copy for your records.

For Office Use:

Amt Rec'd $_____ CK#_____ Rec'd By _____ Date _____