

<b>TOWN OF BARTON</b>		<b>UNIFORM PLUMBING PERMIT Application</b>	Permit #
3482 Town Hall Road Kewaskum, WI 53040 Phone: (262)334-2765			Tax Key #
			One and Two Family <input type="checkbox"/> Commercial <input type="checkbox"/>
<b>Project Location</b>			
<u>Owners Name</u>		<u>Mailing Address</u>	<u>Phone # with area code</u>
<u>Contractor's Name</u>		<u>Contractor's Mailing Address</u>	<u>Phone # with area code</u>
<u>DSPS MP #</u>		<u>Contractor's email or Fax # with area code</u>	
<b>Project Description:</b>			

FEE SCHEDULE					
Fixture	Qty		QTY	FEE	Total
1. Automatic Washer		TOTAL # OF FIXTURES from left column	_____	\$8 each	
2. Sink		25. Fire suppression systems			
3. Dishwasher		26. Grease Interceptor		\$25	
4. Garbage Disposal		27. Sanitary Building Drain- first 75'		\$25	
5. Water Closet		\$.35/ft over 75' (max \$200)		\$_____	
6. Shower		28. Water Lateral/ Supply		\$25	
7. Lavatory		29. Sanitary Sewer Lateral- First 100'		\$25	
8. Laundry Tray		\$.35/ft over 100' (max \$200)		\$_____	
9. Urinal		30. Storm Sewer Lateral- First 100'		\$25	
10. Bath Tub		\$.35/ft over 100' (max \$200)		\$_____	
11. Drinking Fountain				<b>SUBTOTAL</b>	\$_____
12. Floor Drain				<b>+BASE FEE</b>	<b>+ \$50</b>
13. Sill cock/Hose bib				<b>TOTAL PERMIT FEE</b>	<b>\$_____</b>
14. Water Heater					
15. Wash Fountain					
17. Ejectors or Pumps					
18. Water Softener		Double Fee for work started without a permit			
19. Iron Filter/Water Cond.				Re-Inspection fee	\$50
20. Backflow Prevent. Dev.					
21. water Heater					
22. Hot Tub, Spa, whirlpool					
23. Boiler					
24. Misc not listed					

**All work must be inspected before concealing in walls, floors, or ceilings.**

<b>Building Inspector</b> Jeremy Pfeifer Office: 262-629-1774 Cell: 262-689-7346 Email: jeremy@jpbbuildinginspections.com	The applicant agrees to comply with the Municipal Ordinances, State of WI Building and Plumbing Codes, and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all of the above information is accurate. <u>Make check payable to Town of Barton. Mail check and application to Town or drop off at Town Hall during business hours.</u> Have address and permit # if available when requesting an inspection. Call the office or cell phone # to request an inspection. Please give at least 24 hour notice for inspections.		
	<b>Signature of Applicant (Plumber)</b>		
		<b>Date</b>	

Approved \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_