

PLUMBING PERMIT APPLICATION for 2012



Mail Permits to:

Premier Building Inspections LLC
W251N8924 Crestwood Dr.
Sussex WI 53089

Phone 262-844-1594
Fax 262-372-4810

Make Checks Payable to TOWN of LISBON

Please Note: Your cancelled check is your receipt of permit. If you would like a hard copy of your permit, please include a self addressed stamped envelope with your application. A 10.00 fee will be charged for any past permit information.

Owner _____ Job Address _____ Phone# _____
Plumber _____ Address _____ Phone# _____
Lic. / Cert. # _____ Description of work _____ Fax# _____
Est. Cost _____

DRAIN OR WATER CONNECTIONS CONSISTING OF

Water Closets _____ Baths or Showers _____ Urinals _____ Floor Drains _____ Sinks _____ Basins _____
Laundry Tray _____ Drinking Fountains _____ Water Softener _____ Automatic Washer _____
Dishwasher _____ Domestic Water Tanks/Heaters _____ Garbage Grinder _____ Sill Cock _____
Sump or Sanitary Crock _____ Ice Makers _____ Well/Well Pump _____ Others _____

TOTAL NUMBER OF FIXTURES X 11.00 = _____
Outside Sewer 60.00 first 100 feet = _____
Outside Sewer 40.00 additional 100 Feet = _____
Inside Sewer 60.00 first 100 Feet = _____
TOTAL FEE (minimum permit fee 55.00) _____

In the performance of this work the undersigned owner or authorized agent of said premises and his authorized plumber hereby agree to be bound by and submit to all statutes of the state of Wisconsin and all ordinances, rules, and regulations prescribed by the Building Department and the Plumbing Inspector of The Town of Lisbon

Applicants Signature _____ Date _____

OFFICE USE

Permit Issued By _____ Cert. No. 6598 Date _____ Permit No _____

Call for inspections Monday through Friday 8:30am to 4:00pm. Inspections will be done Monday through Friday 8:30am to 2:00, not including holidays. Allow a minimum of 24 hours lead time.