LAKESIDE
INSPECTIONS
715-339-6657
SPS 320.06

UNIFORM PLUMBING PERMIT APPLICATION

UNIFORM PERMIT NO. _____

PARCEL NO. _____

PERMITS REQUIRED CONSTRUCTION ELECTRICAL HVAC OTHER _____

OWNERS NAME MAILING ADDRESS TELEPHONE

CONTRACTORS NAME MAILING ADDRESS TELEPHONE

PROJECT LOCATION
BUILDING ADDRESS SUBDIVISION LOT NUMBER

EST. COST _____ EST.

CONTRACTORS LICENSE NO. _____

PROJECT DESCRIPTION NEW CONSTRUCTION ADDITION REMODEL

ONE AND TWO FAMILY COMMERCIAL

SCHEDULE OF WORK INVOLVED AND INSPECTION FEES

NEW BUILDING

	EACH	COUNT	FEE
Base Fee _____	$35.00		
Plus _____	$.03/Sq. Ft For All Areas	_____ Sq. Ft.	

REPLACEMENT, MODIFICATIONS, AND MISC. ITEMS

	EACH	COUNT	FEE
1. Automatic Washer	5.00		
2. Sink (Kitchen, Mop, Etc.)	5.00		
3. Dishwasher	5.00		
4. Garbage Grinder	5.00		
5. Water Closet	5.00		
6. Shower	5.00		
7. Lavatory	5.00		
8. Laundry Tray	5.00		
9. Bath Tub	5.00		
10. Hot Tub, Spa, Whirlpool	10.00		
11. Floor Drain	5.00		
12. Sight Drain	5.00		
13. Sillcock	2.00		
14. Water Heater	5.00		
15. Sump Pump	5.00		
16. Ejectors or Pump	5.00		
17. Water Softener	5.00		
18. Backflow Prevention Device	5.00		
19. Urinal	5.00		
20. High Pressure Boiler	25.00		
21. Drinking Fountain	5.00		
22. Wash Fountain	5.00		
23. Sanitary Building Drain			
First 75 Feet	10.00		
Over 75 Feet	.35/Ft.		
24. Storm Building Drain			
First 75 Feet	10.00		
Over 75 Feet	.35/Ft.		
25. Manhole	10.00		
26. Catch Basin	5.00		
27. Other _____			
_____			
_____			

Minimum Permit Fee _____ $50.00

RE-INSPECTION FEE _____ $50.00 EACH
FAILURE TO CALL FOR INSPECTION _____ $50.00 EACH
DOUBLE PERMIT FEES WILL BE CHARGED IF WORK IS STARTED BEFORE PERMIT IS ISSUED

The applicant agrees to comply with the municipal ordinances 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, or inspector; and certifies that the above information is accurate.

SIGNATURE OF APPLICANT: _____ DATE: _____

CONDITIONS OF APPROVAL This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Have permit / application number and address when requesting inspections. Call 715-339-6657 for inspections. Give at least 48 hours notice on all inspections.

FEES		ISSUING JURISDICTION	PERMIT ISSUED BY _____
PLAN REVIEW	_____	TOWN	
INSPECTION FEE	_____	VILLAGE	NAME _____
OTHER	_____	CITY	DATE _____
TOTAL	_____	OF: _____	CERT. NO _____