Town of Belgium
Building Department
c/o Roger Kison
610 11th Avenue
Grafton, WI 53024
414-333-4511

DATE RECEIVED	
PERMIT NUMBER	
TAX KEY NUMBER	
ZONING	

## PLUMBING PERMIT APPLICATION

OWNER'S NAME:			G PERIV						
ADDRESS:									
CITY, STATE, ZIP CODE:									
TELEPHONE:									
CONTRACTOR'S NAME:									
ADDRESS:									
CITY, STATE, ZIP CODE:									
TELEPHONE:			CERTIFICA						
SECTION 1:									
Soil & Vents		Show	Shower				Sump Pump		
Bath Tubs		Water Softener					Hose Bibs		
Floor Drain		Water Filter/Treatment			ent		Sinks (Lavatories, Kitchen, Bar)		
Laundry Tubs		Water Closet/Urinal					Water Heater		
Drinking Fountains		Credi	Credit Meter/Back Flow						
Grease Traps		Dishwasher					TOTAL CONNECTIONS		
Automatic Washer Connection		Dispo	Disposal				Multiply by \$7.00		
SECTION 2:							TOTAL SECTION 1		
Sanitary Sewer Connection (Exterior)			\$40.00 TOTAL / SE			/ SECTIO	ECTION 1		
Storm Sewer Connection (Exterior)			\$40.00						
Water Service			\$30.00	1 [	TOTAL / SECTION 2				
Sanitary Sewer Connection (Interior)			\$25.00	]  т	TOTAL FEE (2 LINES ABOVE)				
Storm Sewer Connection (Interior)			\$25.00		Minimum Permit \$35.00				
Sewer Pump Ejector			\$15.00	ALL EFEC DAVABLE TO, TOWARD			VADIE TO, TOWN OF F		
Catch Basins/Man Holes	s/Man Holes \$15.				ALL FEES PAYABLE TO: TOWN OF BELGIUM				
TOTAL SECTION 2			PERMIT IS VALID FOR ONE YEAR FRO				FOR ONE YEAR FROM	DATE	BELOW.
This permit is issued by the Plumbing Inspendent to the description of the Ministration of the plumbing of the	ription he linances o provisions	rein set of the To of said o	forth and m wn of Belgi	nore fu um and	illy desci	ribed in the	e specifications and plansing Code. All Lawful order	herew	ith filed and e Plumbing
	FOR OFFICE USE:  REV 02/21								
CHECK PAID BY					DAT	E RECEIVE	D		
AMOUNT PAID					CHEC	K NUMBE			