



WATER TAP PERMIT APPLICATION

CITY OF MIDDLETON
7426 HUBBARD AVENUE • MIDDLETON, WI 53562
PHONE: 608-821-8370
EMAIL: BUILDINGINSPECTION@CITYOFMIDDLETON.US

Project Address: _____

Plumbing Contractor Information

Name: _____

Address: _____

Phone: _____ E-mail (REQUIRED): _____

Wisconsin Plumbing License #: _____ Expiration Date: _____

Property Owner Information

Name: _____

Address: _____

Phone: _____ E-mail: _____

Project Information

Building Status: _____ New _____ Existing

Building Type: _____ Residential _____ Industrial _____ Commercial

Fire Protection Use: _____ Yes _____ No

Material Type (owner's side of service valve): _____

Connection Size: _____"

Estimated Maximum Flow: _____ (gal/min)

Fee Description	Qty	Cost	Subtotal
Residential (UDC)		\$ 50.00	\$
Commercial (ICC)		\$ 100.00	\$
Fee Total			\$

The Plumbing Contractor shall call for the required inspections at least 24 hours in advanced (M-Th). Failure to do so may result in a fine and possible removal of any finish surfaces covering the plumbing work. The applicant certifies that all information is correct and that all pertinent City Ordinances will be complied with in performing the work for which this permit is issued.

Signature of Contractor: _____

Print Name: _____ Date: _____

REQUIRED INSPECTIONS: WITNESING OF TAP