



PLUMBING PERMIT APPLICATION

CITY OF MIDDLETON
7426 HUBBARD AVE.
MIDDLETON, WI 53562
608/821-8370; FAX: 608/827-1080
www.cityofmilton.us

OFFICE USE ONLY
PERMIT # _____
DATE _____
ISSUED BY: _____

Project Address _____

Plumbing Contractor _____ Plumbing Contractor Address _____ Phone _____

Plumbing Contractor E-mail Address _____

Wisconsin Plumbing License # _____ Expiration Date _____

Property Owner _____ Property Owner Address _____ Phone _____

Property Owner E-mail Address _____

New Building _____ Existing Building _____ The undersigned hereby makes application to do the following work:

Note: Water fixtures above elevation 998.0 will not be allowed unless Owner installs private booster pump to increase in-house pressure.
_____ inch water service from property line to building _____ inch sewer lateral from property line to building
_____ inch water service to property line _____ inch sewer lateral to property line

WATER CALCULATIONS _____ #DFU'S

The City of Middleton requires Bacteria Samples for water services above 2", including distribution piping.

OF FIXTURES:

- ___ AUTO WASH
___ BACK WATER VALVE
___ BAR WASTE
___ BATH TUB
___ CATCH BASIN
___ CELLAR DRAIN
___ DISHWASHER
___ DISPOSAL
___ DOWN SPOUTS
___ DRINKING FOUNTAIN
___ FLOOR DRAIN
___ GAS (TESTING REQUIRED)
___ RES. ___ COMM.
___ 2# ___ 4#
___ DRYER
___ FIREPLACE
___ STOVE
___ GREASE TRAP (STATE APPROVAL REQUIRED)
___ LAUNDRY
___ MACHINE WASTE
___ OPEN SITE FOR HVAC
___ PRESS. REDUCING VALVE (80 LB. MAX)
___ RO SYSTEMS
___ SHOWER
___ SILL COCKS
___ SINKS (ALL SINKS)
___ SOFTENER
___ STORM SEWER
___ SUMP PUMP
___ URINAL
___ WATER CLOSET
___ WATER HEATER

CONNECTION FEES
WATER \$20.00 \$ _____
METER COUPLINGS \$15.00 \$ _____
SAN SEWER UNDER 100' \$20.00 \$ _____
OVER 100' \$30.00 \$ _____
STORM SEWER UNDER 100' \$20.00 \$ _____
OVER 100' \$30.00 \$ _____
SPRINKLER (lawn) \$25.00 \$ _____
FIXTURES \$6.00 \$ _____
AIR ADMIT VALVE \$50.00 \$ _____
BASE FEE \$ 50.00
TOTAL \$ _____

Remarks _____

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 Licensed Plumber or Homeowner if Applicable _____ Date _____

Print Name _____

REQUIRED INSPECTIONS (WHERE APPLICABLE): WATER/SEWER; GROUNDWORK; GAS PIPING; ROUGH; FINAL