

# TOWN OF LEBANON

Dodge County  
P.O. Box 24  
Lebanon, WI 53047

For Inspection Call  
Phone: (262) 490-8200

**Send Permits To:**  
Building Inspector  
P.O. Box 180346  
Delafield, WI 53018

**Makes checks payable to:** Town of Lebanon

|                         |
|-------------------------|
| PERMIT NO. _____        |
| TAX KEY # _____         |
| BUILDING PERMIT # _____ |

## Plumbing Permit Application

|   |   |
|---|---|
| <b>PROJECT LOCATION</b><br>(Building Address) | _____   |
| <b>PROJECT DESCRIPTION</b>                    | <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> ONE & TWO FAMILY |

|                         |  |                                       |
|-------------------------|--|---------------------------------------|
| OWNER'S NAME _____      | MAILING ADDRESS - INCLUDE CITY & ZIP _____ | TELEPHONE - INCLUDE AREA CODE _____   |
| CONTRACTOR'S NAME _____ | MAILING ADDRESS - INCLUDE CITY & ZIP _____ | TELEPHONE - INCLUDE AREA CODE _____   |
| ESTIMATED COST _____    | BONDING/INSURANCE COMPANY _____            | MASTER PLUMBER'S LICENSE NUMBER _____ |

| SCHEDULE OF INSPECTION FEES               |                | EACH                         | COUNT         | FEE   |
|---|----------------|------------------------------|---------------|-------|
| <b>NEW BUILDING, ADDITION, REMODELING</b> | Base Fee ..... | \$35.00                      | _____         | _____ |
|   | Plus .....     | .04/Sq. Ft.<br>For All Areas | _____ Sq. Ft. | _____ |

### REPLACEMENT, MODIFICATIONS, MISC. ITEMS AND AGRICULTURAL BUILDINGS

|  | EACH  | COUNT | FEE   |                                     | EACH    | COUNT | FEE   |
|--|-------|-------|-------|-------------------------------------|---------|-------|-------|
| 1. Automatic Washer                      | 6.00  | _____ | _____ | 25. Fire Suppression Systems -      | 15.00   | _____ | _____ |
| 2. Sink/Dishwasher                       | 6.00  | _____ | _____ | Restaurant Stoves, Fryers, Broilers | _____   | _____ | _____ |
| 3. Garbage Grinder                       | 6.00  | _____ | _____ | 26. Sanitary Building Drain         | _____   | _____ | _____ |
| 4. Water Closet/Urinal                   | 6.00  | _____ | _____ | First 75 Feet                       | 50.00   | _____ | _____ |
| 5. Shower/Lavatory                       | 6.00  | _____ | _____ | Over 75 Feet                        | .35/ft. | _____ | _____ |
| 6. Laundry Tray                          | 6.00  | _____ | _____ | 27. Storm Building Drain            | _____   | _____ | _____ |
| 7. Bath Tub                              | 6.00  | _____ | _____ | First 75 Feet                       | 50.00   | _____ | _____ |
| 8. Hot Tub, Spa, Whirlpool               | 10.00 | _____ | _____ | Over 75 Feet                        | .35/ft. | _____ | _____ |
| 9. High Pressure Boiler                  | 25.00 | _____ | _____ | 28. Manhole                         | 10.00   | _____ | _____ |
| 10. Drinking Fountain                    | 6.00  | _____ | _____ | 29. Catch Basin                     | 6.00    | _____ | _____ |
| 11. Floor Drain/Sight Drain              | 6.00  | _____ | _____ | 30. Water Service                   | _____   | _____ | _____ |
| 12. Sillcock                             | 6.00  | _____ | _____ | First 100 Ft. Lateral               | 60.00   | _____ | _____ |
| 13. Water Heater                         | 6.00  | _____ | _____ | Over 100 Ft. Lateral                | .35/ft. | _____ | _____ |
| 14. Wash Fountain                        | 6.00  | _____ | _____ | 31. Sanitary Building Sewer         | _____   | _____ | _____ |
| 15. Sump Pump                            | 6.00  | _____ | _____ | First 100 Ft. Lateral               | 50.00   | _____ | _____ |
| 16. Ejectors or Pump                     | 6.00  | _____ | _____ | Over 100 Ft. Lateral                | .35/ft. | _____ | _____ |
| 17. Water Softener                       | 6.00  | _____ | _____ | 32. Storm Building Sewer            | _____   | _____ | _____ |
| 18. Storm Sewer Conductor                | 6.00  | _____ | _____ | First 100 Ft. Lateral               | 50.00   | _____ | _____ |
| 19. Backflow Prevention Device           | 6.00  | _____ | _____ | Over 100 Ft. Lateral                | .35/ft. | _____ | _____ |
| 20. Plan Review                          | 15.00 | _____ | _____ | 33. Extension of House Drain        | _____   | _____ | _____ |
| 21. Sprinkler Heads (\$1.00 ea.) MINIMUM | 15.00 | _____ | _____ | Where Fixtures                      | _____   | _____ | _____ |
| 22. Fire Hose Rack                       | 6.00  | _____ | _____ | Already Installed                   | 50.00   | _____ | _____ |
| 23. Fire Department Connection           | 6.00  | _____ | _____ | 34. Septic Abandonment              | 35.00   | _____ | _____ |
| 24. Hydrant                              | 6.00  | _____ | _____ | 35. Other _____                     | 25.00   | _____ | _____ |

Minimum Permit Fee ..... \$50.00 Each  
 Reinspect Fee ..... \$50.00 Each  
 Failure to call for inspection ..... \$50.00 Each  
 GRINDER PUMP  
 MODEL # \_\_\_\_\_  
 DOUBLE FEES ARE DUE IF WORK 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, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate. Have Permit/Application number and address when requesting inspections. Give at least 24 hours notice on all inspections.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

| FEES:                        | RECEIPT   | PERMIT EXPIRATION:  | PERMIT ISSUED BY MUNICIPAL AGENT:                   |
|------------------------------|---|---|---|
| Inspection Fee _____         | Ck # _____<br>Date _____<br>From _____<br>Rec. By _____ | Permit Expires<br>90 Days from date<br>unless noted below.<br>_____ | Name _____<br>Date _____<br>Certification No. _____ |
| <b>NO REFUNDS ON PERMITS</b> |   |   |   |