



4128 Hubertus Rd.
 Hubertus, WI 53033
 Phone: (262) 628-2260
 Fax: (262) 628-2984
 Email:
 inspector@richfieldwi.gov

INCLUDES: HUBERTUS & COLGATE VILLAGE OF RICHFIELD PLUMBING PERMIT

PERMIT NO.
TAX KEY#

Project Address: _____

Project Owner's Name: _____

Project Owner's Phone #: _____

Project Owner's Email: _____

Project Description: _____

Contractor's Name: _____ **Contractor's Phone #:** _____

Contractor's Address, City and Zip: _____

Contractor's Email: _____ **Master Plumber's License #:** _____

Signature of Applicant: _____ **Date:** _____

Schedule of Inspection Fees

	Each	Count	Fee		Each	Count	Fee
1. Kitchen Sink	12.00	_____	_____	22. Sanitary Building Drain			
2. Dishwasher	12.00	_____	_____	First 75 Feet	35.00	_____	_____
3. Garbage Disposal	12.00	_____	_____	Over 75 Feet	.50/Ft.	_____	_____
4. Water Closet	12.00	_____	_____	23. Sanitary Building Sewer			
5. Shower	12.00	_____	_____	First 75 Feet	50.00	_____	_____
6. Lavatory	12.00	_____	_____	Over 75 Feet	.50/Ft.	_____	_____
7. Bath Tub	12.00	_____	_____	24. Water Laterals			
8. Hot Tub, Spa, Whirlpool	12.00	_____	_____	First 75 Feet	35.00	_____	_____
9. Water Heater	12.00	_____	_____	Over 75 Feet	.50/Ft.	_____	_____
10. Sump Pump	12.00	_____	_____	25. Manhole	35.00	_____	_____
11. Sanitary Lift Pump	12.00	_____	_____	26. Catch Basin	35.00	_____	_____
12. Laundry Tray	12.00	_____	_____	27. Water Service			
13. Urinal	12.00	_____	_____	First 75 Feet	35.00	_____	_____
14. Floor Drain	12.00	_____	_____	Over 75 Feet	.50/Ft.	_____	_____
15. Sight Drain	12.00	_____	_____	28. Other-Approved System			
16. Sillcock	12.00	_____	_____	_____			
17. Water Softener	12.00	_____	_____	_____			
18. Storm Sewer Conductor	12.00	_____	_____				
19. Backflow Preventor	12.00	_____	_____				
20. Drinking Fountain	12.00	_____	_____				
21. Iron Filter	12.00	_____	_____				
22. Reverse Osmosis	12.00	_____	_____				

Base Permit Fee (one fixture only)	\$50.00	\$
Each Additional Fixture Add \$12 per Fixture		\$
Re-Inspection Fee	\$60.00	
Failure to call for inspection	\$50.00	
DOUBLE FEES WILL BE CHARGED IF WORK IS STARTED BEFORE PERMIT IS ISSUED		
TOTAL FEES		\$

The applicant agrees to comply with the Town 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, Town or inspector; and certifies that the above information is accurate. Have Permit/Application number and address when requesting inspections. Call (262) 628-2260. Give at least 24 hours notice on all inspections.

PERMIT FEE	PERMIT ISSUED BY INSPECTOR:
\$	Name _____ Date _____ Certification No. _____