

Parcel No. _____

Permit No. _____



VILLAGE OF WINNECONNE, WI

PO BOX 488 • Winneconne, WI 54986 • PH. 920-582-4381 • FAX 920-582-0660

CSR@winneconnewi.gov for submittals & Payments sent to Village of Winneconne, P.O. Box 488, Winneconne, WI 54986

Residential Plumbing Permit

Property Owner: _____ Phone: _____

Property Address: _____

Contractor's name: _____ Phone: _____

Contractor's address: _____ License #: _____

Type of occupancy: _____

Job description: _____ Project Cost \$: _____

List of Fixtures

Toilets _____	Washers _____	Laundry Trays _____	Catch Basins _____
Lavatories _____	Dishwasher _____	Sewage Pits _____	Urinals _____
Bathtubs _____	Water Heaters _____	Bar Sinks _____	Fountains _____
Shower stalls _____	Floor Drains _____	Softener _____	Grease Traps _____
Kitchen Sinks _____	Sump Pumps _____	Roof Drains _____	Service Sink _____
Disposals _____	Lawn Faucets _____	Storm Sewer _____	Mop Sinks _____
Misc Sinks _____	Wall Hydrants _____	Whirlpools _____	Ice Chests _____

Total Fixtures _____ x \$5.00 per fixture = \$ _____ plus \$50.00 Base fee = \$ _____

Owner/Contractor: _____ Date: _____

Inspector: _____ Date: _____

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All work to meet the State Codes or reinspection fees will be charged for improper installation.

The owner/contractor is responsible for making arrangements for the final inspection.