



Building Inspection Department
 5909 N. Milwaukee River Parkway Glendale, WI 53209
 Phone: (414) 228-1708
 Email: inspections@glendalewi.gov

PLUMBING
 PP ____ - ____

OWNER / PROJECT INFORMATION - Complete all areas

PROJECT ADDRESS:

Project Description: _____

Owner/Tenant Name: _____

Owner/Tenant Address: _____
City State Zip

Owner/Tenant Phone: () _____ Email: _____

Single Family or Condominium

Two Family

Commercial or Industrial

CONTRACTOR INFORMATION - Complete all areas

Company Name: _____

Company Address: _____
City State Zip

Contact Person: _____

Contact E-mail: _____

Contact Phone: () _____ Office () _____ Mobile _____

WI Plumbing License # _____

Expiration Date _____

Estimated Cost \$ _____

1 & 2 FAMILY - NEW BUILDING/ADDITION	FEE	UNIT	TOTAL
Base Fee	\$ 75.00		
Plus (Enter total square footage of all building areas in Unit column) (Does NOT include laterals, must include below.)	\$ 0.15		

COMMERCIAL - NEW BUILDING/ADDITION	FEE	UNIT	TOTAL
Base Fee	\$ 150.00		
Plus (Enter total square footage of all building areas in Unit column) (Does NOT include laterals, must include below.)	\$ 0.25		
(For new commercial buildings with less than 16 fixtures, use base fees PLUS line items below.)			

REPLACEMENT, MODIFICATIONS AND MISC. ITEMS - BOTH 1 & 2 FAMILY AND COMMERCIAL							
DESCRIPTION	FEE	UNIT	TOTAL	DESCRIPTION	FEE	UNIT	TOTAL
1. Automatic Washer	\$7.00			23. Sanitary Building Drain			
2. Sink	\$7.00			First 75 Feet	\$30.00		
3. Dishwasher	\$7.00			Over 75 Feet	.50/ft.		
4. Water Closet	\$7.00			24. Storm Building Drain			
5. Shower	\$7.00			First 75 Feet	\$30.00		
6. Lavatory	\$7.00			Over 75 Feet	.50/ft.		
7. Laundry Tray	\$7.00			25. Manhole or Catch Basin	\$20.00		
8. Urinal	\$7.00			26. Water Service - Dom / Fire			
9. Bath Tub	\$7.00			100 Ft. Lateral	\$30.00		
10. Hot Tub, Spa, Whirlpool	\$15.00			Over 100 Ft. Lateral	.50/ft.		
11. High Pressure Boiler	\$25.00			27. Sanitary Building Sewer			
12. Drinking Fountain	\$7.00			First 100 Ft. Lateral	\$30.00		
13. Floor Drain	\$7.00			Over 100 Ft. Lateral	.50/ft.		
14. Sight Drain	\$7.00			28. Storm Building Sewer			
15. Sillcock	\$7.00			First 100 Ft. Lateral	\$30.00		
16. Water Heater	\$7.00			Over 100 Ft. Lateral	.50/ft.		
17. Wash Fountain	\$7.00			29. Extension of House Drain	\$40.00		
18. Sump Pump	\$7.00			30. Grease Interceptor	\$60.00		
19. Ejectors or Pump	\$7.00			31. Air Admittance Valve	\$40.00		
20. Water Softener	\$7.00			32. Re-piping (Drain or Supply)	\$40.00		
21. Storm Sewer Conductor	\$7.00			33. Other (Describe below)	\$40.00		
22. Backflow Prevention Device	\$15.00						
MINIMUM PERMIT FEES					One & Two Family	\$60.00	
					Commercial	\$75.00	

Inspections are required before any work is concealed, when work is complete and PRIOR to Occupancy or Use. Please have the permit number and address when requesting inspections. Please give at least 24 hours notice. Permit EXPIRES 18 months from date of issuance or where work has not commenced or has ceased for a period of 90 days. Up to Quadruple fees charged for failure to obtain permit. FINAL INSPECTIONS ARE MANDATORY - PENALTIES WILL BE CHARGED FOR FAILURE TO CALL FOR INSPECTIONS.	Sub-Total	
	Penalty	
	40% Adm. Fee	
	TOTAL	

CONDITIONS OF APPROVAL

Applicant certifies that all information provided above is accurate. Applicant agrees to comply with all Municipal Ordinances and with the conditions of this permit and further understands that failure to comply with such ordinances or conditions of the permit may result in suspension or revocation of permit(s), denial of future permits, and/or other penalty. Neither the issuance of this permit, nor any inspections performed with respect to this permit, create any legal liability, express or implied, of the Department, Municipality, Agency or Inspector. Nothing about the issuance of this permit, nor the conduct of inspections, shall be construed as a service rendered to or on behalf of the applicant, or the owner or occupant of the premises, and such inspections and the issuance of this permit are for the sole use and benefit of the City of Glendale. No warranty, of any nature, express or implied, shall be inferred from the issuance of this permit.

Signature of Applicant: _____ Date: _____

RECEIPT - FOR OFFICE USE ONLY

AMOUNT: \$	RECEIPT #:	CA / CC / CK / RCPT	DATE:	RECV'D BY:
------------	------------	---------------------	-------	------------