

Village of Wind Point

Plumbing Permit Application



Submit applications with fees to: Village Office, 215 E. Four Mile Rd., Racine, WI 53402. Make checks payable to Village of Wind Point. For questions or to request an inspection, call the Plumbing Inspector Rick Herman at 262-498-3191. Permits are valid for one year after issuance.

Applicant Information:

Application Date: _____ Property Address: _____
 Plumber/Contractor: _____ Phone: _____
 Plumber/Contractor Email: _____ License No. _____
 Homeowner Name: _____
 Homeowner Phone: _____ Project Cost: _____

DESCRIPTION	COST	FEE
Base Fee (Required)	\$50.00	\$50.00
Sanitary Sewer Connection, Storm Sewer Installation, Water Service Connection, Sanitary Building Drain, Storm Building Drain: # _____	\$30.00/ea + \$0.50 for ea ft. over 100 ft	
Water Softeners, Water Heaters, Boilers: # _____	\$30.00/ea	
Water Closets: # _____ Lavatory: # _____ Bath Tubs: # _____ Sinks: # _____ Showers: # _____ Laundry Tubs: # _____ Washing Cont.: # _____ Floor Drains: # _____ Water Heaters: # _____ Dishwashers: # _____ Disposers: # _____ Frost Proof: # _____ Sump Pump: # _____ San/Ejector Pumps: # _____ Boilers: # _____ Bar Sinks: # _____ Ice Makers: # _____ Ice Cube Sinks: # _____ Bubblers: # _____ Grease Traps: # _____ Studer Vent: # _____ Wash Basins: # _____ Backflow Preventers: # _____ Downspouts: # _____ Catch basins: # _____ Lawn Faucets: # _____ Other: # _____	\$11.00/ea	
Well Abandonment	\$55.00	
All New Construction: # _____ sq. ft.	\$0.05/sq. ft.	
SUBTOTAL		
20% Administrative Fee (Subtotal x 20%) =		
Failure to obtain permit before work starts (Double Fees – 1st Offense, Triple Fees – Subsequent)		

Remarks:

Applicant Signature:

Applicant agrees to comply with Village Ordinances, state statutes, federal regulations and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, express or implied, of the Village or Inspector; and certifies that all the above information is accurate.

Signature: _____ Date: _____

Office Use Only

Date filed: _____ Amount paid: _____ Receipt #: _____ Received by: _____
 Final inspection date: _____ Inspector signature: _____
 Permit #: _____ Inspector share: \$ _____