

Inspection Fee _

NO REFUNDS ON PERMITS

Date __ From _

Rec. By_

TOWN OF BROOKFIELD 645 N Janacek Road Brookfield, WI 53045

For Plumbing Inspection Call Jason (262) 364-6969

All Jason (262) 364-6969 Jared (262) 490-8270

PERMIT #	
TAX KEY#	
DITH DING DEDMIT#	

Plumbing I	Permit App	olication
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	BUILDING PERMIT#
PROJECT LOCATION (Building Location)	
PROJECT DESCRIPTION	_Commercial ☐ One & Two Family

						PROJE	ECT DESCRI	PTION	Commercial			One & Two Family
OWNER'S NAME	MAILING ADDRESS - INCLUDE CITY & ZIP TELEPHONE - INCLUDE AREA CODE											
LIST ELECTRICAL CONTRACTOR FOR ALL HVAC REPLACEMENTS MAILING ADDRESS - INCLUDE CITY & ZIP TELEPHONE - INCLUDE AREA CODE								DDE				
CONTRACTOR'S NAME				MAILING ADE	DRESS - INCLU	DE CITY &	ZIP			TELEPHON	E - INCLUDE AREA C	DDE
ESTIMATED COST LICENSE NUMBER												
SCHEDULE OF INSPECTION FEES												
NEW BUILDING,									EACH	С	OUNT	FEE
ADDITION, OR REMODELING	+New								\$65.00 + .06/sq. ft. For all areas	-	sq.ft	
REPLACEMENT, MODIFICATIONS, AND MISCELLANEOUS ITEMS+BASE FEE												
		EACH	COUNT	F.	EE					EACH	COUNT	FEE
1. Automatic Washer	LUDE A S	he Munici the Depa s when red	pal Ordinar artment, M questing Ins	nces and unicipal spection	with the ity, Age s.	e cond	Fire Hose R Fire Depart Hydrant Fire Suppre Restau Water Servi First 10 Over 10 Sanitary Ses Sewer Later Manhole/Cs Sewer Eject Sanitary Bu First 10 Over 10 Storm Build First 10 Over 10 Extension o Re-Inspecti Failure to O Double LOPE FOF	ack	(Fryers/Boilers (Fer ft.)	bove info	rmation is	ermit creates no accurate. Have
FEES		RECEIPT	CEIPT PERMIT EXPIRATION				PERMIT ISSUED BY MUNICIPAL AGENT					

Permit Expires 90 days from date Unless otherwise noted

below

Certification Number _