



2000 MUNICIPAL DR.
NEENAH, WI 54956
BUILDING INSPECTIONS (920) 720-7104

PERMIT #:	
RECEIPT #:	

WATER & SEWER PERMIT APPLICATION

RESIDENTIAL (1 OR 2 FAMILY)
 COMMERCIAL/INDUSTRIAL/MULTI-FAMILY

PROJECT ADDRESS:	
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PROPERTY OWNER		APPLICANT (<input type="checkbox"/> Check if same as owner)	
NAME		NAME	
ADDRESS		ADDRESS	
CITY, STATE, ZIP		CITY, STATE, ZIP	
PHONE		CONTACT NAME	
		PHONE	
		MASTER PLUMBER #	

WYE MEASUREMENT	INSPECTOR TO MEASURE
WATER SERVICE LOCATION	INSPECTOR TO MEASURE
SEWER SERVICE PIPE - SIZE	
SEWER SERVICE PIPE - TYPE	
WATER SERVICE PIPE - SIZE	
WATER SERVICE PIPE - TYPE	
<input type="checkbox"/> INSPECTOR FEE	
<input type="checkbox"/> INTERCEPTOR IMPACT FEE	
<input type="checkbox"/> SAC FEE	
<input type="checkbox"/> WATER TAP FEE	
<input type="checkbox"/> SEWER TAP FEE	
TOTAL FEE:	

OTHER WORK OR COMMENTS: _____

Application is hereby made for a permit to open a trench and lay or repair sewers, water services and conduits to and on the premises as described above. This permit shall be granted on payment of the required fee(s) to the Village of Fox Crossing Utility District. It is expressly provided that the person for whose use or benefit this permit is issued is not authorized to excavate in front of any premises except such as are herein mentioned; that he/she shall occupy and excavate in said street in conformity to the provisions of all applicable Municipal Ordinances; that he/she shall be liable for any and all damages that may occur or result in consequence of such occupancy, use or excavation of said street, alley or premises; and that he/she shall put up and maintain such barriers and lights as will effectively prevent the happening of any accident in consequence of such occupancy, use or excavation. Any violation of the terms in this permit will be subject to the penalties provided by the Ordinances of the Village of Fox Crossing Utility District, the permit being void except for the purpose named. The applicant agrees in consideration of the issuance of this permit to do only the work specified herein and to faithfully comply with the laws and regulations of the State of Wisconsin and the Ordinances of the Village of Fox Crossing.

APPLICANT SIGNATURE:		DATE:	
APPROVED BY:		DATE:	