

City of Prairie du Chien
SANITARY SEWER CONNECTION/DISCONNECTION PERMIT
 Chapter 13, Municipal Code

Permit No. _____ Date: _____

The undersigned applicant hereby applies to install/connect or disconnect sanitary sewer:

Owner: _____ Owner's Phone No. _____

Owner's address: _____

Location/Premises address: _____

Legal Description: Lot(s) _____

Block _____ Plat _____

Tax Parcel Number: _____

WI Licensed Plumber: _____ License # _____

Estimated date of connection/disconnection _____

Purpose of application: **(all work requires an inspection*)**

Repairs to existing sanitary sewer lateral	<input type="checkbox"/>	Residential	<input type="checkbox"/>	
Install new sanitary sewer main	<input type="checkbox"/>	Commercial	<input type="checkbox"/>	<input type="checkbox"/> \$500.00 <i>(includes inspection fee)</i>
Install new sanitary sewer service	<input type="checkbox"/>	Industrial	<input type="checkbox"/>	
Disconnect sanitary sewer service	<input type="checkbox"/>			<input type="checkbox"/> \$25.00 <i>(inspection only)</i>

<p style="text-align: center;"><u>Note</u></p> <p><i>Industrial applications must include a laboratory analysis of their waste waters.</i></p>	<p>B.O.D. (mg/l) _____</p> <p>S.S. (mg/l) _____</p> <p>FLOW (gals./day) _____</p>
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The undersigned applicant hereby agrees to comply with the provisions of Chapter 13 of the Municipal Code of the City of Prairie du Chien, WI, and with the provisions of Wisconsin Administrative Code, Plumbing Code, COMM Chapters 81-87. Upon completion of the work stated in this application and prior to covering said work, the applicant shall notify the Superintendent of the Waste Water Treatment Facility, who shall inspect or cause to be inspected said work.

Applicant's Signature: _____ Date _____

Application/Permit Approved

 Waste Water Treatment Superintendent

Note
Failure to comply with inspections shall result in penalty.

INSPECTION OF SANITARY SEWER WORK PERFORMED

The above sanitary sewer work has been performed and inspected. It meets all of the criteria and requirements of the City of Prairie du Chien, the Wastewater Superintendent and/or his agent.

Date: _____ Time: _____ a.m.
 _____ p.m.

Inspected by: _____