

**TOWN OF LAWRENCE**

2400 Shady Court De Pere, WI 54115 Ph: (920)336-9131 Fax: (920) 336-9193

**SANITARY SEWER/WATER PERMIT**

Sewer Permit #:

Parcel #:

Job Site Address:

Lot #:

Sub Division:

**SEWER CONTRACTOR INFORMATION**

Sewer Contractor:

Address:

City:

State:

Zip Code:

Phone:

Email:

Fax:

Current State License Number:

Cell Phone:

**OWNER / CONTRACTOR INFORMATION**

Owner Name / Contractor:

Address:

Fax:

City:

State:

ZIP Code:

Phone:

**WATER LINE INFORMATION**

Plastic

Size: \_\_\_\_\_

**PERMIT FEES:**

Sewer Permit Fee:

\$ \_\_\_\_\_

Sewer Inspection Fee:

\$ \_\_\_\_\_

Central Brown County Water Authority (CBCWA) Fee:

\$ \_\_\_\_\_

Water Impact Fee:

\$ \_\_\_\_\_

**TOTAL FEE:**

\$ \_\_\_\_\_

**\*\*Payment Received\*\***

Date: \_\_\_\_\_

Check #: \_\_\_\_\_

**PERMIT ISSUED BY**

Name:

Date:

Title: Building Inspector

Inspection Complete

Completed By:

Phone Number: 920-347-3715

Date Completed:

**ALL OTHER INFORMATION**

- **48 HOUR NOTICE IS REQUIRED** BEFORE ANY CONNECTION CAN BE MADE TO MUNICIPAL UTILITIES BY CALLING THE TOWN OF LAWRENCE AT 920-347-9131
- ALL SEWER & STORM SEWER PIPE MUST BE MINIMUM SCHEDULE 40
- MINIMUM FOUR (4) FOOT BETONITE OR CLAY DAM
- CURB BOX MUST BE MARKED AND FULLY EXTENDED
- FERNCO WITH TOWN APPROVAL ONLY
- MINIMUM 24 HOUR NOTICE BEFORE STARTING PROJECT – NO BACKFILLING UNTIL CONNECTION HAS BEEN INSPECTED
- ALL ANGLES, BENDS AND REDUCTION IN SIZE MUST BE DONE WITH PROPER PLASTIC FITTINGS

**\*\*\*FAILURE TO COMPLY WITH ANY OF THE ABOVE WILL RESULT IN A CITATION\*\*\***

The applicant understands and agrees that the permitted work shall comply with all permit provisions and conditions of the above-named Town in effect at the time of this application, and with any special provisions listed above or attached hereto, and any all plans, details, or notes attached hereto and made a part thereof.

Signature of applicant:

Date: