

# TOWN OF WILSON PLUMBING PERMIT

DATE \_\_\_\_\_ PARCEL #59030 \_\_\_\_\_

Owner Name \_\_\_\_\_

Address \_\_\_\_\_

Project Address \_\_\_\_\_

Additional Information \_\_\_\_\_

\_\_\_\_\_

Description of project \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Master Plumber Name \_\_\_\_\_

Phone # \_\_\_\_\_ License # \_\_\_\_\_

Residential Connection \_\_\_\_\_

Industrial Sewer Connection \_\_\_\_\_

Commercial Sewer Connection \_\_\_\_\_

Estimated Cost of Project \$ \_\_\_\_\_

## Inspection Record

Date \_\_\_\_\_ type \_\_\_\_\_ Date \_\_\_\_\_ type \_\_\_\_\_

Number of inspections included with this permit \_\_\_\_\_

Date Paid \_\_\_\_\_ Check # \_\_\_\_\_

Plumbing Inspector Larry Hilbelink (920) 946-0252

NOTE: 24 HOUR NOTICE IS REQUIRED FOR EACH INSPECTION. Added charges will be made for each additional inspection.

\_\_\_\_\_ Signature of Applicant