Permit	#

WATER CONNECTION APPLICATION

Property Owner:	Phone:	
Property Address:		
I certify that I will conform to inspections which may pertain	o all Ordinances and notify the City of Le R in to the following work. I also certify that a supervision of the proper officers of the C	oy for all ll work will be
Contractor: (Print)	Phone: _	
(Address)		
(Signed)	(Date)	
	Water	
Residential	\$500 Water Tap Fee	
	\$50 Inspection Fee (\$100.00 after hours	s / weekends)
Commercial	\$750.00 Minimum*	/ 1 1 \
In director of	\$50 Inspection Fee (\$100.00 after hours	s / weekends)
Industrial	\$1500 Minimum * \$50 Inspection Fee (\$100.00 after hours	y / woolzonda)
Institutional	\$750 Minimum *	s / weekends)
institutional	\$50 Inspection Fee (\$100.00 after hours	s / weekends)
Re-inspection fee	\$25 per occurrence	57 weekends)
* Requires a minimum tap fee	e as described above, plus the cost of all ma	aterials provided.
Plan Review:	WT Inspection:	
	Inspector	Date
	Plumbing	
For inspections call the Builde 48 hours notice is reques	ing and Zoning office (309) 962-7409. sted for all inspections.	
Inspection	Inspection Date	
Service		
Underground		
Underground Rough in		