



# APPLICATION FOR WATER SERVICE

SANITARY DISTRICT NO. 4 – TOWN OF BROOKFIELD  
645 N. Janacek Rd., Brookfield, WI 53045

**MAILING: P.O. Box 1296, Brookfield, WI 53008-1296**

Office: 262-798-8631 Fax: 262-796-0339



ADDRESS OF PROPERTY TO BE SERVED WITH WATER (IF NO ADDRESS ATTACH SURVEY WITH LEGAL DESCRIPTION)			
Lot Number	Block Number	Subdivision	Tax Key Number

Name of Owner	Address of Owner	Telephone No.
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Application is for service to:  New Building  Existing Building

Email
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**Type of Occupancy - (check one)**

- Single Family Home
- Commercial, Retail
- Hotel, Motel
- Other \_\_\_\_\_
- Two Family Home
- Commercial, Office
- Industrial
- Multi-Family Building / Number of Units [ \_\_\_\_\_ ]
- Manufacturing
- Restaurant
- Warehousing
- Institutional

**PLEASE NOTE that if a private well exists on this property, within 1 year of the date of connection to municipal water, either a WELL OPERATION PERMIT must be obtained OR the well must be ABANDONED.**

- ( ) System will be abandoned in accordance with the terms of SD #4 ordinances at time of closing and Ch. NR 812, Wis. Adm. Code
- ( ) System will be kept in operation, which is allowed only if: There is one (1) dedicated outside line from the pressure tank - **or** - There is one (1) dedicated line around the interior perimeter of the residence so as to connect several hose bibs to the outside. The dedicated line **MUST BE** color-coded so that it is easily recognized as a separate line from other piping in the house and must be certified by a master plumber that it is a totally separate line and is not connected to the municipal water system.

**Mandatory Requirement: If an existing lateral (which was installed on owner's property for future water) is used to make the connection to the municipal water, IT MUST BE PRESSURE-TESTED at the time of connection.**

**Applicants for other than single or two family dwellings must provide the following information:**

- Please indicate the service lateral size desired: 1"  1 ¼"  1 ½"  2"  Other Size [ \_\_\_\_\_ ]
- Will the building have a fire sprinkler system? Yes  No  - If YES, give system size \_\_\_\_\_, # of sprinkler heads \_\_\_\_\_
- Will the building require the installation of fire hydrants? Yes  No  - If YES, how many \_\_\_\_\_ fire hydrants.

**Water Meter Size**

The Utility will select and furnish the correct meter size based on the calculated peak demand for the building. Indicate the calculated peak demand and **attach computations used to determine this rate.** Calculated peak demand \_\_\_\_\_ GPM.

The applicant agrees to pay for water service in accordance with the rate, rules, and regulations authorized by the Public Service Commission of Wisconsin in effect at the time of delivery, and including all future amendments, as authorized by the PSC. The applicant further agrees to abide by the rules, regulations, and ordinances of Sanitary District No. 4, the Town of Brookfield Plumbing Code, and all applicable provisions of the Wisconsin Statutes and Wisconsin Administrative Code.

Signature of OWNER \_\_\_\_\_ Date \_\_\_\_\_

Print or type Name \_\_\_\_\_

FOR DEPARTMENTAL USE			
Application For Service Approved by		Date	Meter Size Approved
Lateral Installed By	License #	Installation Approval Date	Plumbing Permit No.

**Note:** The approval of this application expires 60 days from the date approved. An administrative fee of \$15.00 will be charged for each additional approval. If utility personnel come to install the water meter and find that the wrong size meter horn has been installed, the property owner will be billed a \$50.00 rescheduling fee. Installation of a meter does not grant, nor imply in any way, plumbing approval. Please contact the Town of Brookfield Building Inspections for all approvals of plumbing work.