

VILLAGE OF BLOOMFIELD  
Utility Department

PO Box 388 N1100 Town Hall Rd Pell Lake, WI 53157 Phone:(262)279-6039 Ext 2 Fax:(262)279-3545

**APPLICATION FOR WATER/SEWER SERVICE**  
**INSTALLATION TO NEW CONSTRUCTION**

The undersigned hereby applies for the connection of a water and sanitary sewer service from the mains to: \_\_\_\_\_, Pell Lake.  
(MUST HAVE FIRE NUMBER TO INSTALL)

Lot numbers: \_\_\_\_\_ Tax Key #: \_\_\_\_\_  
(THIS APPLICATION CANNOT BE PROCESSED WITHOUT A CORRECT TAX KEY # - ESPECIALLY SPLIT PARCELS).

**Owner Information:**

Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Is this a new home? \_\_\_\_\_

Is this a new business? \_\_\_\_\_

Is this an additional service to a building? \_\_\_\_\_

Will this service be seasonal or year-round? Seasonal \_\_\_\_\_ Year-round \_\_\_\_\_

The applicant agrees to comply with the ordinances and the conditions of this permit; understands that the issuance of the permit creates no legal liability, express or implied, of the Village of Bloomfield Utility Department; and certifies that all the above information is accurate.

I do hereby certify that the above information is true and, under penalty of law, the undersigned agree NOT to connect to the sanitary sewer or water service until proper paperwork, signatures, connection fees (see Connection Fees) and a \$9,000 deposit for installation of laterals and road restoration. The above information must be filed at the Bloomfield Utility's office.

**All fees must be paid in full before water and sewer connection is scheduled.**

**\*\*However, because road restoration charges are estimated, I agree that I will be responsible for any additional charges that are incurred when the road is restored or that I will be reimbursed for any over payment.**

Signature of Owner

Date of Application

**APPLICATION FOR WATER/SEWER SERVICE  
INSTALLATION TO NEW CONSTRUCTION**

The undersigned hereby certifies the below information is true and under penalty of law, the undersigned agrees NOT to connect to the sanitary sewer or water service until proper paperwork, signatures, any fees are paid and notification is given to the Bloomfield Utility Department. I also certify that the attached Connection Procedures will be followed properly.

In the performance of this work the undersigned owner (or authorized agent) of said premises and authorized plumber and utility contractor hereby agrees to be bound by and to submit to all statutes, Village Ordinances, and plumbing rules and regulations prescribed by the Bloomfield Utility Department, Walworth County and the State of Wisconsin.

The connection must have shut-off ball valves on both sides of the meter within 2 feet of the meter. If the meter is located more than 3 feet from where the water service first enters the building, a control valve must be located as per Comm 82.40 (4) (b) a. within 3 feet of the point where the line enters the building. No sewer connection can be made until the water meter is installed with consequences of \$250.00 a month fines possibly being imposed.

**\*\*Please contact Bloomfield Utility Department (BUD) regarding B-Box and Sanitary “Y” locations.\*\***

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**Lateral Plumber Information:** (Must Have WI Master Plumbers License – Current and available upon request):

Plumbing Company Name: \_\_\_\_\_

Plumbers Name: \_\_\_\_\_ WI Master Plumbers License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Signature of Plumber \_\_\_\_\_

**Estimated Cost of Lateral Installation:** \$ \_\_\_\_\_

**Excavators or Utility Contractors Name and Address (if applicable):**

Excavators/Utility Contractor Company Name: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ WI Utility License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Signature of Contractor \_\_\_\_\_

**Installation Plumber Information:** (Must Have WI Master Plumbers License – Current and available upon request):

Plumbing Company Name: \_\_\_\_\_

Plumbers Name: \_\_\_\_\_ WI Master Plumbers License #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Signature of Plumber \_\_\_\_\_

\_\_\_\_\_ Meter Horn - \$86.25

\_\_\_\_\_ \$600.00 Connection Fee  
(for properties that currently have a service at the lot line)

# VILLAGE OF BLOOMFIELD

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### COST RECOVERY AGREEMENT

I/We, the undersigned, do hereby understand and agree that as an applicant or petitioner of the Village/Town of Bloomfield, I/we will be responsible for all normal fees payable by an applicant or petitioner (i.e. application fees, engineer fees, attorney fees, etc.). I/We further understand and agree to be responsible for any additional or consequential costs to the municipality as a result of my/our application or petition (i.e. engineering, legal, or other professional services). All fees and costs shall be paid within thirty (30) days of invoice date and must be paid prior to the issuance of any permit or license. If payment is not made, said fees and costs may be assessed against the real property as a special charge.

I/We understand that the Village/Town of Bloomfield by and through their agents, representatives (elected or appointed), employees, successors or assignees make no representations of their findings. I/We forever hold them harmless of all liability whether founded in tort or contract and as such agree to indemnify them from all claims arising out of these transactions.

#### Project Information:

**Project Name:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Billing Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

\_\_\_\_\_ **Email:** \_\_\_\_\_

#### Property Owner(s):

\_\_\_\_\_  
*Name – Print*

\_\_\_\_\_  
*Name – Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Name – Print*

\_\_\_\_\_  
*Name – Signature*

\_\_\_\_\_  
*Date*

#### Applicant/Agent of all Owners:

\_\_\_\_\_  
*Name – Print*

\_\_\_\_\_  
*Name – Signature*

\_\_\_\_\_  
*Date*