



# Application for Sewer Addition Meter

City of Madison Engineering Division

Engineering Operations Facility ■ 1600 Emil Street ■ Madison, WI 53713

Application No. \_\_\_\_\_

## Property Owner/Plumber Information

Owner: \_\_\_\_\_  
*Last First M.I.*

Legal Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City State Zip*

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City State Zip*

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Estimated Date Piping Will Be Completed: \_\_\_\_\_ Meter Size Requested: \_\_\_\_\_

## Sewer Addition Meter Information

**Property Description** (check appropriate space)

Residential       Commercial       Industrial

**Sewer Addition Meter Use** (check appropriate space)

Boiler Blow Down       Cooling Tower Blow Down       Other \_\_\_\_\_

**Getch showing any existing/new equipment in relation to the Sewer Addition Meter to be attached**  
*Please note, applications without a sketch cannot be processed*

If Building Inspection has issued a permit for work to be completed, please indicate Permit No. \_\_\_\_\_  
Plans can be accessed with this information.

Contact Cindy Hemenway at (608) 266-6429 or [chemenway@cityofmadison.com](mailto:chemenway@cityofmadison.com) to schedule an inspection/installation appointment.

**\$150.00 fee must be paid in full before application is processed.**  
**Make checks payable to "City of Madison Engineering Division"**

AA

I hereby make application to the City of Madison for a Sewer Addition Meter and agree to comply with all applicable City regulations pertaining to its installation and operation. I further agree to have this sewer deduct meter inspected as needed by the City of Madison Engineering Department and/or Water Utility. Applications are valid for 60 days after the estimated date piping will be completed provided on application.

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Plumber Signature: \_\_\_\_\_ Date: \_\_\_\_\_