

MARQUETTE COUNTY Sanitary Permit Application - Privy In accord with Ordinance 74			Marquette County Planning, Zoning & Land Information Department Montello, WI 53949 608-297-3036		
County Sanitary Permit Number:			Parcel ID Number:		
Application Information-Please Print			Property Location Information		
Property Owner's Name:			$\frac{1}{4}$ $\frac{1}{4}$, Sec , T N, R E/W		
Owner's Mailing Address:			Lot Number	Block Number	Nearest Road/Intersection
City, State	Zip Code	Phone	Subdivision Name or CSM Number		
Type of Building: <input type="checkbox"/> 1 or 2 family dwelling- No. of bedrooms ____ <input type="checkbox"/> Public/Commercial ____ <input type="checkbox"/> Other			<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of		
Property Address:					
Type of Permit: <input type="checkbox"/> Vault Privy <input type="checkbox"/> Pit Privy <input type="checkbox"/> RV Transfer Container Other _____					
Tank Specifications (for vaults or transfer containers): Size of Tank _____ Manufacturer _____					
Responsibility Statement: I, the undersigned, assume responsibility for installation of the system as noted in this application					
Name		Signature		Phone No.	
Address (Street, City, State, Zip)					
County Use Only					
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Permit Fee	Date	Issuing Agent Signature	
Comments:					