

# AGREEMENT FOR NON-PLUMBING SANITARY PERMIT ISSUANCE

Document Number:

Parcel Number:

Name and Address Return:

**Jackson County Zoning and  
Land Information Department  
307 Main Street, Courthouse  
Black River Falls WI 54615**

(Space Above This Line Reserved For Recording Data)

I/We the undersigned \_\_\_\_\_ am/are the owner(s) of the property located in Jackson County, Wisconsin, and described as follows (attach full legal description if necessary): \_\_\_\_\_

I/We declare that the above described property will contain a structure that will be utilized as a dwelling unit for human habitation, either permanently or intermittently, and the property is not served by a public sewer system.

I/We agree that there will be no water brought into the structure either by pressure or gravity and no plumbing draining fixtures will be installed in the structure, which include sinks, tubs, showers, etc., as prohibited by Jackson County Ordinance unless served by a public sewer system.

I/We, pursuant to §66.0119, Wis. Stats, consent to allow entry for inspection purposes the appropriate county officials of the Jackson County Zoning Department to ensure these conditions are met.

This agreement shall be binding upon the owner, their heirs and assignees and will run with the land.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Owner(s) Signature

\_\_\_\_\_  
Typed or Printed Name of Owner(s)

\_\_\_\_\_  
Owner(s) Signature

\_\_\_\_\_  
Typed or Printed Name of Owner(s)

## ACKNOWLEDGMENT:

State of Wisconsin }  
Jackson County }  
}

Personally came before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, the above named \_\_\_\_\_

\_\_\_\_\_ to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Typed or Printed Name of Notary

Notary Public, \_\_\_\_\_ County, WI.  
My commission is permanent. If not, state expiration date: