



11011 BRIGHAM AVE / P.O. BOX 189
BLUE MOUNDS, WI 53517-0189
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AFFIDAVIT

STATE OF WISCONSIN
COUNTY OF DANE
VILLAGE OF BLUE MOUNDS

_____, being first duly sworn on oath, deposes and
(Name)

says:

1. That I am a licensed _____ plumber, registered
(classification)
with the State of Wisconsin, License # _____.
2. That I hereby certify that I have installed the building sewer & water
service at _____,
Blue Mounds, according to requirements of the Wisconsin Administrative
Code.

Dated this _____ day of _____, _____.

(Signature of Plumber)

Subscribed & sworn to before
me this _____ day of _____, _____.

Notary Public, State of Wisconsin,
or authorized signer.