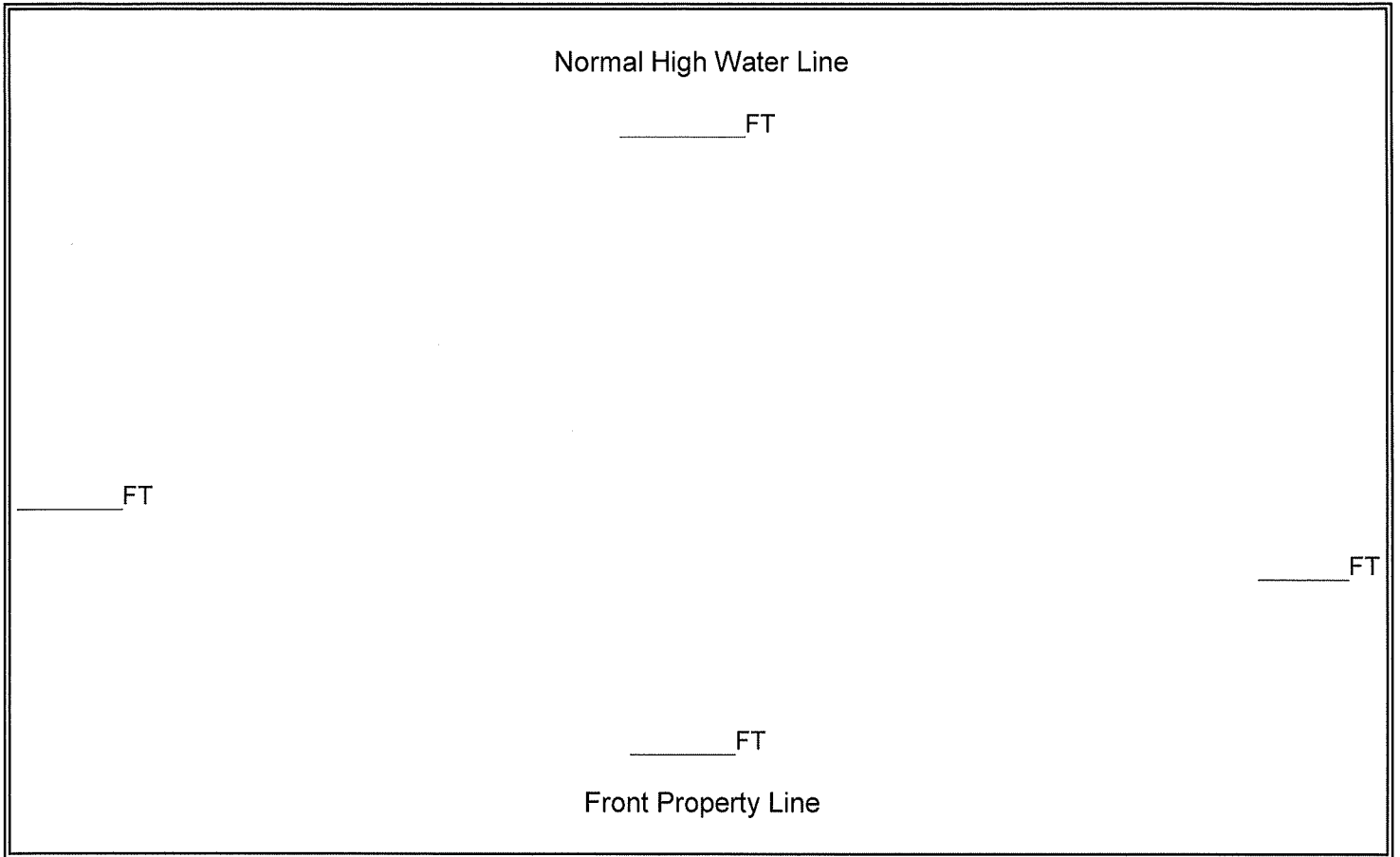


Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73	<h2 style="margin:0;">Wisconsin Uniform Building Permit Application</h2> <p style="font-size: small; margin: 5px 0;">Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]</p>	Application No. Parcel No.																						
PERMIT REQUESTED <input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other:																								
Owner's Name		Mailing Address	Tel.																					
Contractor Name & Type		Lic/Cert#	Exp Date																					
Dwelling Contractor (Constr.)		Mailing Address	Telephone & Email																					
Dwelling Contr. Qualifier (The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.)																								
HVAC																								
Electrical Contractor																								
Electrical Master Electrician																								
Plumbing																								
PROJECT LOCATION	Lot area _____ Sq.ft.	<input type="checkbox"/> One acre or more of soil will be disturbed	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City of _____																					
Building Address		County	Subdivision Name																					
Zoning District(s)		Zoning Permit No.	Lot No. Block No.																					
		Setbacks:	Front _____ ft. Rear _____ ft. Left _____ ft. Right _____ ft.																					
1. PROJECT		3. OCCUPANCY	6. ELECTRIC																					
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Other:		<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other:	Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead 7. WALLS <input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:																					
2. AREA INVOLVED (sq ft)		4. CONST. TYPE	9. HVAC EQUIP.																					
	Unit 1 Unit 2 Total	<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD 5. STORIES <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Basement	<input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC <input type="checkbox"/> Fireplace <input type="checkbox"/> Other:																					
Unfin.			10. SEWER																					
Bsmt			<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____																					
Living Area			11. WATER																					
Garage			<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well																					
Deck/Porch																								
Totals																								
			12. ENERGY SOURCE																					
			<table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <th>Fuel</th> <th>Nat Gas</th> <th>LP</th> <th>Oil</th> <th>Elec</th> <th>Solid</th> <th>Solar Geo</th> </tr> <tr> <td>Space Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo	Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo																		
Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																		
			13. HEAT LOSS																					
			_____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)																					
			14. EST. BUILDING COST w/o LAND																					
			\$ _____																					
<p>I understand that I am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.</p> <input type="checkbox"/> I vouch that I am or will be an owner occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the second page of this form.																								
APPLICANT (Print:)		Sign:	DATE																					
APPROVAL CONDITIONS																								
This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.																								
ISSUING JURISDICTION		State-Contracted Inspection Agency#:	Municipality Number of Dwelling Location																					
<input type="checkbox"/> Town of _____ <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____		<input type="checkbox"/> County of _____ <input type="checkbox"/> State _____																						
FEES:		PERMIT(S) ISSUED	WIS PERMIT SEAL #																					
Plan Review	\$ _____	<input type="checkbox"/> Construction																						
Inspection	\$ _____	<input type="checkbox"/> HVAC																						
Wis. Permit Seal	\$ _____	<input type="checkbox"/> Electrical																						
Other	\$ _____	<input type="checkbox"/> Plumbing																						
Total	\$ _____	<input type="checkbox"/> Erosion Control																						
		PERMIT ISSUED BY:																						
		Name _____																						
		Date _____ Tel. _____																						
		Cert No. _____																						
		Email: _____																						

Lot Layout/Site Plan



Show the location and size of all
Existing Structures in Solid Lines
Proposed Structure in Dotted Lines