

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73		<b>Wisconsin Uniform Building Permit Application</b> 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))]				Application No. _____  Parcel No. _____		
<b>PERMIT REQUESTED</b> <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#	Mailing Address		Tel. & Fax		
Dwelling Contractor (Constr.)								
Dwelling Contr. Qualifier			The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.					
HVAC								
Electrical								
Plumbing								
<b>PROJECT LOCATION</b>		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 _____				
				_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E/W				
Building Address			County	Subdivision Name		Lot No.    Block No.		
Zoning District(s)		Zoning Permit No.		<b>Setbacks:</b>	Front ft.	Rear ft.		
					Left ft.	Right ft.		
<b>1. PROJECT</b>		<b>3. OCCUPANCY</b>		<b>6. ELECTRIC</b>		<b>9. HVAC EQUIP.</b>		
<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 <b>7. WALLS</b>		<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:		
<b>2. AREA INVOLVED (sq ft)</b>		<b>4. CONST. TYPE</b>		<b>10. SEWER</b>		<b>12. ENERGY SOURCE</b>		
	Unit 1	Unit 2	Total	<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:		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"/> <input type="checkbox"/> Water Htg <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Unfin. Bsmt				<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD		<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____		
Living Area				<b>5. STORIES</b>		<b>13. HEAT LOSS</b>		
Garage				<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other:		<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:		
Deck/Porch				<input type="checkbox"/> Plus Basement		_____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)		
Totals						<b>14. EST. BUILDING COST w/o LAND</b>  \$ _____		
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. <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 reverse side of the last ply of this form.								
<b>APPLICANT (Print):</b> _____				<b>Sign:</b> _____		<b>DATE</b> _____		
<b>APPROVAL CONDITIONS</b> 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.								
<b>ISSUING JURISDICTION</b>		<input type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <input type="checkbox"/> County of <input type="checkbox"/> State →			State-Contracted Inspection Agency#: _____		Municipality Number of Dwelling Location _____ - _____	
<b>FEES:</b>		<b>PERMIT(S) ISSUED</b>		<b>WIS PERMIT SEAL #</b>		<b>PERMIT ISSUED BY:</b>		
Plan Review	\$ _____	<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control				Name _____ Date _____ Tel. _____ Cert No. _____		
Inspection	\$ _____							
Wis. Permit Seal	\$ _____							
Other	\$ _____							
Total	\$ _____							