

Wisconsin Division of Safety and Buildings		WISCONSIN UNIFORM BUILDING PERMIT APPLICATION				Application No.																									
Wisconsin Stats. 101.63, 101.73		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))]				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's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg			Lic/Cert#	Mailing Address		Tel.																									
						FAX#																									
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						FAX#																									
PROJECT LOCATION		Lot area Sq.ft.	<input type="checkbox"/> One acre or more of soil will be disturbed	_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E (or) W																											
Building Address			Subdivision Name		Lot No.	Block No.																									
Zoning District(s)		Zoning Permit No.		Setbacks:	Front ft.	Rear ft.	Left ft.																								
							Right ft.																								
1. PROJECT		3. OCCUPANCY		6. ELECTRIC		9. HVAC EQUIP.																									
<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		<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:																									
				7. FOUNDATION		12. ENERGY SOURCE																									
				<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other:		Fuel Nat Gas LP Oil Elec Solid Solar Space Htg _____ Water Htg _____ <input type="checkbox"/> Dwelling unit has 3 kilowatt or more in electric space heating equipment capacity.																									
2. AREA INVOLVED (sq ft)		4. CONST. TYPE		10. SEWER		13. HEAT LOSS																									
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Unit 1</th> <th>Unit 2</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Unfin. Bsmt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Living Area</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Garage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deck</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Totals</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck				Totals				<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"/> Plus Basement		<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____		_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)	
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				11. WATER		14. EST. BUILDING COST w/o LAND																									
				<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well		\$ _____																									
I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the 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. If I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side of the last ply. 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.																															
APPLICANT'S SIGNATURE _____				DATE SIGNED _____																											
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		<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																								
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:																									
Plan Review \$ _____ Inspection \$ _____ Wis. Permit Seal \$ _____ Other \$ _____ Total \$ _____		<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. _____																									