

Wisconsin Division of Safety and Buildings Wisconsin Stats. 101.63, 101.73	WISCONSIN UNIFORM BUILDING PERMIT APPLICATION 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.																					
PERMIT REQUESTED <input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control 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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PROJECT LOCATION	Lot area	Sq. ft. _____ 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. ELECTRICAL																					
<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: Re-roof	<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																					
2. AREA INVOLVED	4. CONST. TYPE	7. FOUNDATION																					
Unfin. Bsmt _____ Sq Ft Living Area _____ Sq Ft Garage _____ Sq Ft Deck _____ Sq Ft.	<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd: <input type="checkbox"/> WI UDC <input type="checkbox"/> U.S. HUD	<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other:																					
	5. STORIES	8. USE																					
	<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:																					
		10. SEWER																					
		<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit No.:																					
		11. WATER																					
		<input type="checkbox"/> Municipal Utility <input type="checkbox"/> Private On-Site Well																					
		12. ENERGY SOURCE																					
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Fuel</td> <td style="width:10%;">Nat Gas</td> <td style="width:10%;">LP</td> <td style="width:10%;">Oil</td> <td style="width:10%;">Elec</td> <td style="width:10%;">Solid</td> <td style="width:10%;">Solar</td> </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	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"/>
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Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																	
		<input type="checkbox"/> Dwelling unit has 3 kilowatt or more in electric space heating equipment capacity.																					
		13. HEAT LOSS																					
		_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on WIScheck report)																					
		14. EST. BUILDING COST																					
		Cost of Re-roof \$ _____																					
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 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 Inspection Agency #:	Municipality Number of Dwelling Location _____ - _____																					
FEES:	PERMIT(S) ISSUED	WIS PERMIT SEAL #																					
Plan Review \$ _____ Inspection \$ _____ Wis. Permit Seal \$ _____ Other \$ _____ Total \$ 20.00	<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control																						
		PERMIT ISSUED BY:																					
		Name _____																					
		Date _____ Tel. _____																					
		Cert No. _____																					