

Wisconsin Division of Industry Services 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 <input type="checkbox"/> Other:																																																
Owner's Name		Mailing Address	Tel.																																													
Contractor Name & Type		Lic/Cert#	Mailing Address																																													
Dwelling Contractor (Constr.)			Tel. & Fax																																													
Dwelling Contr. Qualifier		The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.																																														
HVAC																																																
Electrical																																																
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 _____ 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.	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:																																													
2. AREA INVOLVED (sq ft)	4. CONST. TYPE	7. WALLS	12. ENERGY SOURCE																																													
<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/Porch</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/Porch				Totals				<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD	<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <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> </thead> <tbody> <tr> <td>Space Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Water Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo	Space Htg							Water Htg						
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	5. STORIES	8. USE	10. SEWER																																													
	<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:	<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____																																													
			11. WATER																																													
			<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well																																													
			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																																													
			\$ _____																																													
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.																																																
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 <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 Agency#: _____																																																
FEES:		PERMIT(S) ISSUED	WIS PERMIT SEAL #																																													
Plan Review	\$ _____	<input type="checkbox"/> Construction																																														
Inspection	\$ _____	<input type="checkbox"/> HVAC																																														
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