

Wisconsin Division of Safety and Buildings  Wisconsin Stats. 101.63, 101.73	<b>WISCONSIN UNIFORM BUILDING PERMIT APPLICATION</b>  <b>Instructions on back of second ply.</b> The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]	Application No. _____  Parcel No. _____
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<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: _____
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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# _____
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# _____
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# _____

<b>PROJECT LOCATION</b>	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
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Building Address _____	Subdivision Name _____	Lot No. _____	Block No. _____
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Zoning District(s) _____	Zoning Permit No. _____	<b>Setbacks:</b>	Front _____ ft.	Rear _____ ft.	Left _____ ft.	Right _____ ft.
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<b>1. PROJECT</b>	<b>3. OCCUPANCY</b>	<b>6. ELECTRIC</b>	<b>9. HVAC EQUIP.</b>	<b>12. ENERGY SOURCE</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	<input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC	<table 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> <input type="checkbox"/> Dwelling unit has 3 kilowatt or more in electric space heating equipment capacity.	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"/>																						
<b>2. AREA INVOLVED (sq ft)</b>	<b>4. CONST. TYPE</b>	<b>7. WALLS</b>	<b>10. SEWER</b>	<b>13. HEAT LOSS</b>																								
<table style="width:100%; border-collapse: collapse;"> <tr> <th style="width:10%;"></th> <th style="width:10%;">Unit 1</th> <th style="width:10%;">Unit 2</th> <th style="width:10%;">Total</th> </tr> <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> </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 <b>5. STORIES</b> <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: _____ <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other: _____	<input type="checkbox"/> Fireplace <input type="checkbox"/> Other: _____ <b>10. SEWER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____ <b>11. WATER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well	_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)
	Unit 1	Unit 2	Total																									
Unfin. Bsmt																												
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Totals																												
				<b>14. EST. BUILDING COST w/o LAND</b>																								
				\$ _____																								

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. 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.

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 Financial Responsibility Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply.

<b>APPLICANT'S SIGNATURE</b> _____	<b>DATE SIGNED</b> _____
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**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.  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 _____
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<b>FEES:</b>	<b>PERMIT(S) ISSUED</b>	<b>WIS PERMIT SEAL #</b>	<b>PERMIT ISSUED BY:</b>
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. _____