

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73	<h2 style="margin:0;">Wisconsin Uniform Building Permit Application</h2> <p style="margin:0; font-size: small;">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))]</p>	Application No. _____  Parcel No. _____
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**PERMIT REQUESTED**     Constr.     HVAC     Electric     Plumbing     Erosion Control     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 _____		

<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. _____
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>	<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 checked="" type="checkbox"/> Other: _____	Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead <b>7. WALLS</b> <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"/> 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>10. SEWER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____	<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 Geo</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 Geo	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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<b>2. AREA INVOLVED (sq ft)</b>	<b>4. CONST. TYPE</b>	<b>5. STORIES</b>	<b>8. USE</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/Porch</td> <td></td> <td></td> <td></td> </tr> <tr> <td><b>Totals</b></td> <td></td> <td></td> <td></td> </tr> </table>		Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck/Porch				<b>Totals</b>				<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD  <input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other: _____	<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"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other: _____	_____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)
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				<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.

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.     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 \$ _____	<input type="checkbox"/> Construction		Name _____
Inspection \$ _____	<input type="checkbox"/> HVAC		Date _____ Tel. _____
Wis. Permit Seal \$ _____	<input type="checkbox"/> Electrical		Cert No. _____
Other \$ _____	<input type="checkbox"/> Plumbing		
Total \$ _____	<input type="checkbox"/> Erosion Control		