

**PERMIT REQUESTED**  Constr.  HVAC  Electric  Plumbing  Erosion Control  Other:

Owner's Name	Mailing Address (including zip code):		Telephone
	E-mail Address:		
Contractor Name & Type	Cert. # / Expiration / /	Mailing Address (including zip code)	Telephone & Fax
Dwelling Contractor (Construction)	/ /		
Dwelling Contractor Qualifier	/ /		
HVAC	/ /		
Master Electrician	/ /		
Electrical Contractor	/ /		
Plumbing	/ /		

**PROJECT LOCATION** Lot area Sq.ft.  One acre or more of soil will be disturbed **Project Type**  New  Utility Shed  Alteration  Remodeling  Addition  Sign  Garage  Fence

Building Address \_\_\_\_\_ Subdivision Name \_\_\_\_\_ Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_

Zoning District(s) \_\_\_\_\_ Zoning Permit No. \_\_\_\_\_ Setbacks: Front \_\_\_\_\_ ft. Rear \_\_\_\_\_ ft. Left \_\_\_\_\_ ft. Right \_\_\_\_\_ ft.

Flood Plain Zoning \_\_\_\_\_ using FEMA Map Number 55043C0014E effective 9/2/2011. If applicable, elevation of 1<sup>st</sup> floor: \_\_\_\_\_

<b>1.</b> <b>The Building Permit will not be issued until all information is provided. If owner is pulling permit, then the Cautionary Statement to Owner is needed.</b>		<b>3. OCCUPANCY</b> <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other	<b>6. ELECTRIC</b> 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:	<b>9. HVAC EQUIP.</b> <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>12. ENERGY SOURCE</b> 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.
<b>2. AREA INVOLVED (sq ft)</b>		<b>4. CONST. TYPE</b> <input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD	<b>8. USE</b> <input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:	<b>10. SEWER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____	<b>13. HEAT LOSS</b> _____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)
<b>5. STORIES</b> <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement	<b>11. WATER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well	<b>14. EST. BUILDING COST w/o LAND</b> \$ _____			
Unfin. Bsmt	Unit 1	Unit 2	Total		
Living Area					
Garage					
Deck					
Totals					

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 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.

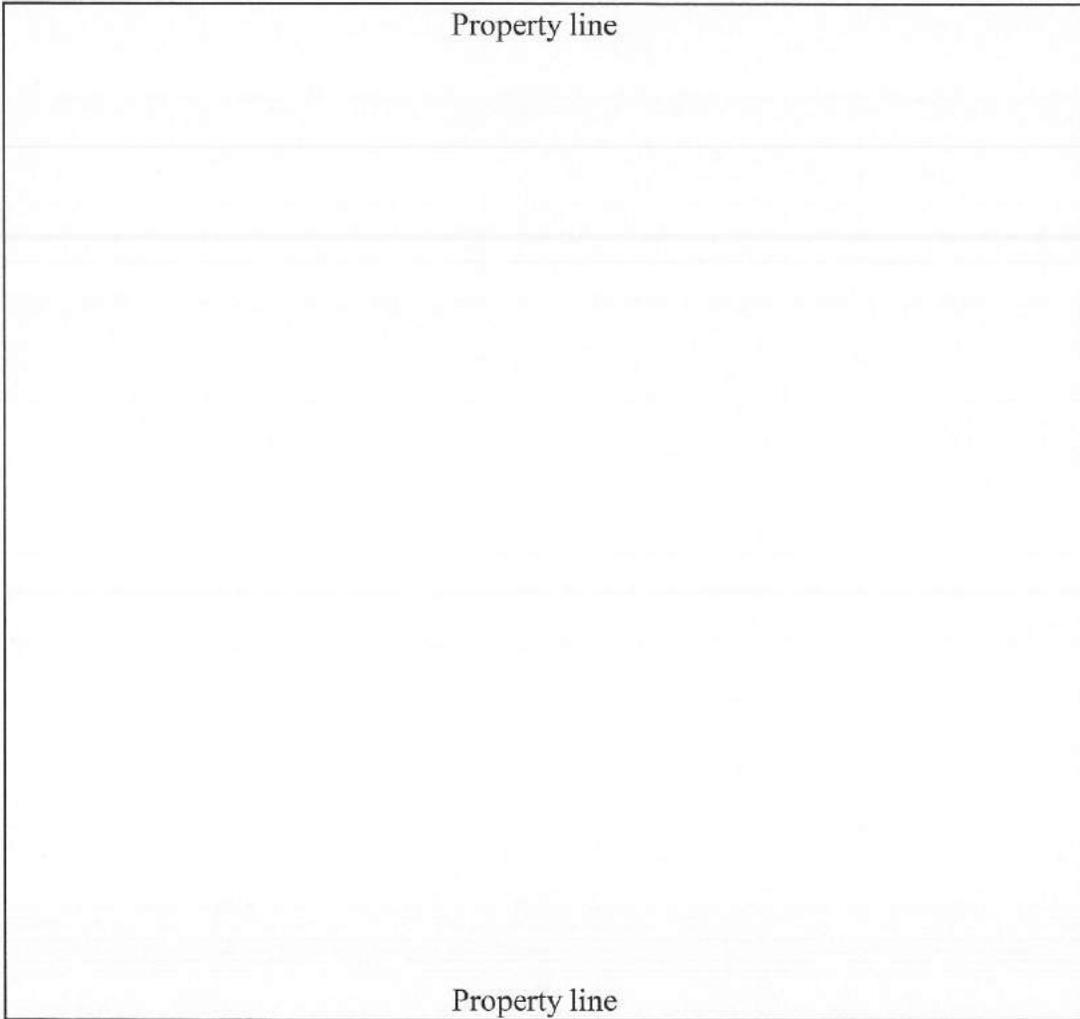
**Scope of Work - Attach a site plan showing all measurements from lot lines.**

**Conditions of Approval:**

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **Date Signed** \_\_\_\_ / \_\_\_\_ / 2016

<b>Estimated Cost</b>	<b>Fees</b>	<b>PERMIT(S) ISSUED</b>	<b>WI PERMIT SEAL #</b>	<b>PERMIT ISSUED BY:</b>
Construction \$ _____ Electric \$ _____ Plumbing \$ _____ HVAC \$ _____ Zoning \$ _____ Total \$ _____	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____	<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control	If Applicable	Name _____ Date ____ / ____ / 2016 Cert. No. 70410 Telephone: 608-375-4400 / 608-778-7162 Date Paid ____ / ____ / 2016 Receipt # _____

# Site Plan



Property Line

Property Line

**This portion may not be used as setback. Setback is figured from property line.**

**Curb line is not the property line**

Owners Name \_\_\_\_\_

Address of property \_\_\_\_\_

Parcel number            206- \_\_\_\_\_ - \_\_\_\_\_

Diggers hotline # \_\_\_\_\_

### **Cautionary Statement to Owners Obtaining Building Permits**

101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:

If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two- family dwelling code or an ordinance enacted under sub. (1) (a), because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

### **Cautionary Statement to Contractors for Projects Involving Building Built Before 1978**

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608)261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance

### **Wetlands Notice to Permit Applicants**

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

### **Additional Responsibilities for Owners of Projects Disturbing One or More Acre of Soil**

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Contractor Credential Requirements**

All contractors shall possess an appropriate contractor credential issued by the Wisconsin Division of Safety and Buildings. Contractors are also required to only subcontract with contractors that hold the appropriate contractor credentials.



**STATE OF WISCONSIN**  
 Department of Safety and Professional Services

INDUSTRY SERVICES DIVISION  
 TTY: Contact Through Relay

**Governor Scott Walker      Secretary Dave Ross**

**Contractor Credential Verification for Building Projects**

06/12/2013

In addition to the typical credentials that the state or local municipalities require for the trades people (master plumber, master electrician, fire sprinkler installer, refrigerant handling technician, and many others found in SPS 305), effective July 1, 2009 a **business credential is now required for all general contractors and subcontractors.**

For information on Wisconsin construction credentials visit our website at: <http://dsps.wi.gov/Licenses-Permits/Credentialing/Trades-Professions> .

**\*\*\* This is a voluntary form to help you keep track of all contractors on the construction site. Do not submit this form to the division. A copy of this form can be posted at the construction site, filed for your records and made available to local and state inspectors. \*\*\***

**Project name and address:** \_\_\_\_\_

<b>The following contractors and subcontractors performing the indicated code-related work need the following business credential. Fill in the credential number below:</b>			
Dwelling Contractor Certifications (if permittee)		HVAC Contractor	
Elevator Contractor		Manufactured Home Installer	

<b>Fill in the Building Contractor Registration number or other Business Credential number for all other subcontractors doing work by type listed below:</b>			
Electric Wiring		Precast Concrete Installation	
Drywall and Plastering		Roofing	
General Building Construction		Siding	
Finish Carpentry		Masonry and Stone Work	
Fire Protection		Structural Steel	
Flooring		Tile and Terrazzo	
Framing Carpentry		Wall Coverings	
Glass and Glazing		Other building or Equipment Specialties	
Insulation		Other building or Equipment Specialties	
Building Site Preparation/Stabilization		Other building or Equipment Specialties	
Plumbing		Other building or Equipment Specialties	
Poured Concrete		Other building or Equipment Specialties	

**Attach additional pages if necessary**

_____	_____
General Contractor Name	General Contractor representative
_____	_____
Contractor Address	Phone Number