

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="font-size: small; margin: 5px 0;">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 <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# _____	Exp Date _____	Mailing Address _____
Dwelling Contractor (Constr.) _____				Telephone & Email _____
Dwelling Contr. Qualifier (The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.) _____				
HVAC _____				
Electrical Contractor _____				
Electrical Master Electrician _____				
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 _____
Zoning District(s) _____		Zoning Permit No. _____		Setbacks: _____
		Front _____ ft.		Rear _____ ft.
		Left _____ ft.		Right _____ ft.

1. PROJECT <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: _____				3. OCCUPANCY <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other: _____		6. ELECTRIC Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead 7. WALLS <input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other: _____		9. HVAC EQUIP. <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: _____		12. ENERGY SOURCE <table style="width:100%; font-size: x-small;"> <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> <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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2. AREA INVOLVED (sq ft) <table style="width:100%; font-size: x-small;"> <tr> <th></th><th>Unit 1</th><th>Unit 2</th><th>Total</th></tr> <tr> <td>Unfin.</td><td></td><td></td><td></td></tr> <tr> <td>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> </table>					Unit 1	Unit 2	Total	Unfin.				Bsmt				Living Area				Garage				Deck/Porch				Totals				4. CONST. TYPE <input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD 5. STORIES <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: _____ <input type="checkbox"/> Basement		8. USE <input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other: _____		10. SEWER <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)							
	Unit 1	Unit 2	Total																																										
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Bsmt																																													
Living Area																																													
Garage																																													
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Totals																																													
								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.

☐ 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 second page 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.

ISSUING JURISDICTION <input type="checkbox"/> Town of _____ <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<input checked="" type="checkbox"/> County of _____ <input type="checkbox"/> State _____	State-Contracted Inspection Agency#: _____	Municipality Number of Dwelling Location _____
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FEES: Plan Review \$ _____ Inspection \$ _____ Wis. Permit Seal \$ _____ Other \$ _____ Total \$ _____		PERMIT(S) ISSUED <input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control	WIS PERMIT SEAL # _____	PERMIT ISSUED BY: Name _____ Date _____ Tel. _____ Cert No. _____ Email: _____
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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 standards, and will comply with those standards.

Owner's Signature: _____ Date: _____