Dept of Safety & Professional Services
Industry Services Division
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 ☐ Constr. ☐ HVAC ☐ Electric ☐ Plumbing ☐ Erosion Control ☐ Other:

Owner's Name	Mailing Address	Tel.

Contractor Name & Type	Lic/Cert#	Exp Date	Mailing Address	Telephone & Email
Dwelling Contractor (Constr.)				
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. ☐ One acre or more of soil will be disturbed ☐ Town ☐ Village ☐ 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
☐ New ☐ Repair
☐ Alteration ☐ Raze
☐ Addition ☐ Move
☐ Other:

2. AREA INVOLVED (sq ft)

	Unit 1	Unit 2	Total
Unfin. Bsmt			
Living Area			
Garage			
Deck/ Porch			
Totals			

3. OCCUPANCY
☐ Single Family
☐ Two Family
☐ Garage
☐ Other:

4. CONST. TYPE
☐ Site-Built
☐ Mfd. per WI UDC
☐ Mfd. per US HUD

5. STORIES
☐ 1-Story
☐ 2-Story
☐ Other:
☐ Basement

6. ELECTRIC
Entrance Panel Amps: _____
☐ Underground
☐ Overhead

7. WALLS
☐ Wood Frame
☐ Steel
☐ ICF
☐ Timber/Pole
☐ Other:

8. USE
☐ Seasonal
☐ Permanent
☐ Other:

9. HVAC EQUIP.
☐ Furnace
☐ Radiant Basebd
☐ Heat Pump
☐ Boiler
☐ Central AC
☐ Fireplace
☐ Other:

10. SEWER
☐ Municipal
☐ Sanitary Permit# _____

11. WATER
☐ Municipal
☐ On-Site Well

12. ENERGY SOURCE

Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo
Space Htg	☐	☐	☐	☐	☐	☐
Water Htg	☐	☐	☐	☐	☐	☐

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.

☐ **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 ☐ Town of ☐ Village of ☐ City of ☐ County of _____ ☐ State _____ State-Contracted Inspection Agency#: _____ Municipality Number of Dwelling Location ____ ____ ____ ____ ____

FEES:		PERMIT(S) ISSUED	WIS PERMIT SEAL #	PERMIT ISSUED BY:
Plan Review	$ _____	☐ Construction	_____	Name _____
Inspection	$ _____	☐ HVAC		Date _____ Tel. _____
Wis. Permit Seal	$ _____	☐ Electrical		Cert No. _____
Other	$ _____	☐ Plumbing		Email: _____
Total	$ _____	☐ Erosion Control		

SBD-5823(R08/17) Distribute: ☐ Ply 1 – Issuing Jurisdiction; ☐ Ply 2- Issuer forwards to state w/in 30 days; ☐ Ply 3- Inspector; ☐ Ply 4- Applicant