

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73		<h2 style="margin:0;">Wisconsin Uniform Building Permit Application</h2>				Application No. _____  Parcel No. _____																																														
<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: _____																																																		
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 _____		_____	_____	_____		_____																																														
<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. _____	Block No. _____																																													
Zoning District(s) _____		Zoning Permit No. _____		<b>Setbacks:</b> Front _____ ft.           Rear _____ ft.           Left _____ ft.           Right _____ ft.																																																
<b>1. PROJECT</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: _____		<b>3. OCCUPANCY</b> <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <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>2. AREA INVOLVED (sq ft)</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Unit 1</th> <th>Unit 2</th> <th>Total</th> </tr> </thead> <tbody> <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>Totals</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck/ Porch				Totals				<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>5. STORIES</b> <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: _____ <input type="checkbox"/> Basement		<b>8. USE</b> <input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other: _____		<b>12. ENERGY SOURCE</b> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <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> </thead> <tbody> <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> </tbody> </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>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 (available from "Total Building Heating Load" on Rescheck report)																																														
				<b>11. WATER</b> <input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well		<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 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.

<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				Email:	_____
Total	\$ _____	<input type="checkbox"/> Erosion Control					

## INSTRUCTIONS

The owner, builder or agents shall complete the application form down through the Signature of Applicant block and submit it and building plans and specifications to the enforcing jurisdiction, which is usually your municipality or county. Permit application data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local code administration. **Please type or use ink and press firmly with multi-ply form.**

### PERMIT REQUESTED

- Check off type of Permit Requested, such as structural, HVAC, Electrical or Plumbing.
- Fill in owner's current Mailing Address and Telephone Number.
- If the project will disturb one acre or more of soil, the project is subject to the additional erosion control and stormwater provisions of ch. NR 151 of the WI Administrative Code. Checking this box will satisfy the related notification requirements of ch. NR 216.
- Fill in Contractor and Contractor Qualifier Information. Per s. 101.654 (1) WI Stats., an individual taking out an erosion control or construction permit shall enter his or her dwelling contractor certificate number, and name and certificate number of the dwelling contractor qualifier employed by the contractor, unless they reside or will reside in the dwelling. Per s. 101.63 (7) Wis. Stats., the master plumber name and license number must be entered before issuing a plumbing permit.

### PROJECT LOCATION

- Fill in Building Address (number and street or sufficient information so that the building inspector can locate the site).
- Local zoning, land use and flood plain requirements must be satisfied before a building permit can be issued. County approval may be necessary.
- Fill in Zoning District, lot area and required building setbacks.

PROJECT DATA - Fill in all numbered project data blocks (1-14) with the required information. All data blocks must be filled in, including the following:

2. Area (involved in project):
  - Basements - include unfinished area only
  - Living area - include any finished area including finished areas in basements
  - Two-family dwellings - include separate and total combined areas
3. Occupancy - Check only "Single-Family" or "Two-Family" if that is what is being worked on. In other words, do not check either of these two blocks if only a new detached garage is being built, even if it serves a one or two family dwelling. Instead, check "Garage" and number of stalls. If the project is a community based residential facility serving 3 to 8 residents, it is considered a single-family dwelling.
9. HVAC Equipment - Check only the major source of heat, plus central air conditioning if present. Only check "Radiant Baseboard" if there is no central source of heat.
10. Sewage - Indicate if the dwelling will be served by municipal sewer or privately owned treatment system. If a private system is used, include the Sanitary Permit number. Note: A building permit cannot be issued for a new dwelling that utilizes a privately owned wastewater treatment system until a sanitary permit has been issued. This applies to any new or existing private onsite wastewater treatment system that will be used by the dwelling.
13. Heat Loss – Provide heat loss summation data (BTUs/HR) derived from the ResCheck report or the "Heating System Sizing Summary Calculator" available on the Division's website: <http://dsps.wi.gov/Programs/Industry-Services/Industry-Services-Programs/One-and-Two-Family-UDC>.
14. Estimated Cost - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.

SIGNATURE – The owner or the contractor's authorized agent shall sign and date this application form. If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

CONDITIONS OF APPROVAL - The authority having jurisdiction uses this section to state any conditions that must be complied with pursuant to issuing the building permit.

ISSUING JURISDICTION: This must be completed by the authority having jurisdiction.

- Check off Jurisdiction Status, such as town, village, city, county or state and fill in Municipality Name
- Fill in State Inspection Agency number only if working under state inspection jurisdiction.
- Fill in Municipality Number of Dwelling Location
- Check off type of Permit Issued, such as construction, HVAC, electrical or plumbing.
- Fill in Wisconsin Uniform Permit Seal Number, if project is a new one- or two-family dwelling.
- Fill in Name and Inspector Certification Number of person reviewing building plans and date building permit issued.

**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: \_\_\_\_\_

Send payment and building permit application to:

Nature's Edge Inspection Agency  
Jane Meissner, Building Inspector  
W11954 Kitty Dell Circle  
Crivitz, WI 54114

Cell: 715-245-1708  
email: nebuildinginspector@gmail.com

\*\*\*Most important info that needs to be filled out on application\*\*\*

1. Contact information - Including name, address, phone number and email
2. What are you doing? - Please be specific
3. Approximate cost of your project