

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73		<b>Wisconsin Uniform Building Permit Application</b>				Application No.			
		<b>Instructions on back of second ply.</b> The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m)]				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		Email:		Tel.			
<b>Contractor Name &amp; Type</b>		<b>Lic/Cert# Exp Date</b>	<b>Mailing Address</b>		<b>Tel. &amp; Email</b>				
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"/> Alteration	<input type="checkbox"/> Addition	<input type="checkbox"/> Repair	<input type="checkbox"/> Raze	<input type="checkbox"/> Move	<input type="checkbox"/> Other		
<b>2. AREA INVOLVED (sq ft)</b>		Unit 1		Unit 2		Total			
Unfin. Bsmt.									
Living Area									
Garage									
Deck/Porch									
Totals									
<b>3. OCCUPANCY</b>	<input type="checkbox"/> Single Family	<input type="checkbox"/> Two Family	<input type="checkbox"/> Garage	<input type="checkbox"/> Other	<b>4. USE</b>	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Permanent	<input type="checkbox"/> Other:	
<b>5. CONSTRUCTION TYPE</b>	<input type="checkbox"/> Site Built	<input type="checkbox"/> Mfd. Per WI UDC	<input type="checkbox"/> Mfd. Per US HUD						
<b>6. STORIES</b>	<input type="checkbox"/> 1-Story	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Other:	<input type="checkbox"/> Plus Basement	<b>7. EST. BUILDING COST w/o LAND</b>	\$			
<b>8. 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. ELECTRIC</b>	Panel Amps: _____	<input type="checkbox"/> Underground	<input type="checkbox"/> Overhead
<b>10. SEWER</b>	<input type="checkbox"/> Municipal	<input type="checkbox"/> Sanitary Permit #	<b>11. WATER</b>	<input type="checkbox"/> Municipal	<input type="checkbox"/> On-Site Well				
<p>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.</p> <p><input type="checkbox"/> 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.</p> <p><b>APPLICANT (Print:)</b> _____ <b>Sign:</b> _____ <b>DATE</b> _____</p>									
<b>APPROVAL CONDITIONS</b>	This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.								
<b>ISSUING JURISDICTION</b>	<input type="checkbox"/> Town of	<input type="checkbox"/> County of	State-Contracted	Municipality Number of Dwelling Location					
	<input type="checkbox"/> Village of	<input type="checkbox"/> State	Inspection Agency#:	_____ - _____					
	<input type="checkbox"/> City of								
<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							

SBD-5823(R4/17) Distribute:  Ply 1 – Issuing Jurisdiction;  Ply 2- Issuer forwards to state w/in 30 days;  Ply 3- Inspector;  Ply 4- Applicant

## 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.

1. PROJECT DATA - Fill in all numbered project data blocks (1-11) 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.
4. USE - Seasonal, permanent or other.
7. ESTIMATED BLDG COST - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.
10. SEWER - A building permit cannot be issued until a sanitary permit has been issued for any new or affected existing private onsite wastewater treatment system.

**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 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 Industry Services.