

Wisconsin Division of Safety and Buildings	Twin Lakes Building Permit Application				Application No.				
Wisconsin Stats. 101.63, 101.73					Zoning No.				
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#	Mailing Address		Tel. & Fax				
Dwelling Contractor (Constr.)									
Dwelling Contr. Qualifier			The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.						
HVAC									
Electrical									
Plumbing									
PROJECT LOCATION	Lot area	<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.	Setbacks:	Front	Rear	Left	Right		
				ft.	ft.	ft.	ft.		
1. PROJECT	<input type="checkbox"/> New	<input type="checkbox"/> Repair	3. OCCUPANCY	<input type="checkbox"/> Single Family	6. ELECTRIC	<input type="checkbox"/> Entrance Panel	9. HVAC EQUIP.	12. ENERGY SOURCE	
<input type="checkbox"/> Alteration	<input type="checkbox"/> Raze	<input type="checkbox"/> Two Family	Amps: _____	<input type="checkbox"/> Radiant Basebd	<input type="checkbox"/> Furnace	Fuel	Nat	LP	Oil
<input type="checkbox"/> Addition	<input type="checkbox"/> Move	<input type="checkbox"/> Garage	<input type="checkbox"/> Underground	<input type="checkbox"/> Heat Pump	Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other:		<input type="checkbox"/> Other:	<input type="checkbox"/> Overhead	<input type="checkbox"/> Boiler	Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			7.WALLS	<input type="checkbox"/> Central AC					
2. AREA INVOLVED (sq ft)	4. CONST. TYPE	<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Fireplace						
	Unit 1	Unit 2	Total	<input type="checkbox"/> Site-Built	<input type="checkbox"/> Steel	<input type="checkbox"/> Other:	13. HEAT LOSS		
Unfin.				<input type="checkbox"/> Mfd. per WI UDC	<input type="checkbox"/> ICF				
Bsmt				<input type="checkbox"/> Mfd. per US	<input type="checkbox"/> Timber/Pole	10. SEWER	_____ BTU/HR Total Calculated		
Living				HUD	<input type="checkbox"/> Other:	<input type="checkbox"/> Municipal	Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)		
Area				5. STORIES	8. USE	<input type="checkbox"/> Sanitary Permit#			
Garage				<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal				
Deck/ Porch				<input type="checkbox"/> 2-Story	<input type="checkbox"/> Permanent	11. WATER	14. EST. BUILDING COST w/o LAND		
				<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Municipal			
Totals				<input type="checkbox"/> Plus Basement		<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>									
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. <input type="checkbox"/> See attached for conditions of approval.							
ISSUING JURISDICTION		<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 _____ - _____		
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:			
Building Fee	\$ _____	<input type="checkbox"/> Construction				Name _____			
Park Fee	\$ _____	<input type="checkbox"/> HVAC				Date _____ Tel. _____			
Hook Up Fee	\$ _____	<input type="checkbox"/> Electrical				Cert No. _____			
Occupancy	\$ _____	<input type="checkbox"/> Plumbing							
Driveway	\$ _____	<input type="checkbox"/> Erosion Control							
Sidewalk	\$ _____								
Prop Maint. Fee	\$ _____								
Total	\$ _____								

Cautionary Statement to Owners Obtaining Building Permits

101.65(1r) 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.

INSPECTORS: PLEASE RETURN SECOND PLY WITHIN 30 DAYS AFTER ISSUANCE TO (You may fold along the dashed lines and insert this form into a window envelope.):

Safety & Buildings Division
P O Box 2509
Madison, WI 53701-2509