



Application #
PtlqgevF guetkr vqpp

PERMIT REQUESTED Constr HVAC Electric Plumbing Erosion Control Other:

Owner's Name _____ Mailing Address _____

Contractor Name & Type **Cert# Exp Date** **Mailing Address** **Tel # & Email**

Dwelling Contractor (Constr)			
Dwelling Contractor Qualifier		"The Dwelling Contractor Qualifier shall be an owner, CEO, "COB or employee of the Dwelling Contractor"	
HVAC Contractor			
Electrical Contractor			
Master Electrician			
Plumbing Contractor			

PROJECT LOCATION Lot area _____ One acre or more of soil will be disturbed _____ Rctegni% C _____ _____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E/W

Building Address _____ County _____ Subdivision Name _____ Lot # _____ Block # _____

Zoning District(s) _____ Zoning Permit# _____ **Setbacks** Front _____ Rear _____ Left _____ Right _____

1. PROJECT		3. OCCUPANCY		6. ELECTRIC		9. HVAC EQUIP		12. ENERGY SOURCE						
New Dwelling	F gem	Single Family	Entrance Panel	Furnace	Fuel	Nat Gas	LP	Oil	Elect	Solid	Solar Geo			
Alteration	Raze	Two Family	Amps:	Radiant	Space Htg.									
Addition	Move	Garage	Underground	Heat Pump	Water Htg.									
Other		Other:	Overhead	Boiler	13. HEAT LOSS									
2. AREA INVOLVED (sq ft)			7. WALLS		Central AC	_____ BTU/Hr Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)								
Unit 1	Unit 2	Total	4. CONST. TYPE		Fireplace	14. EST. BUILDING COST w/o LAND								
			Site-Built	Wood Frame	Other	_____ \$								
			Mfg. per WI UDC	Steel										
			Mfg. per US HUD	ICF										
			5. STORIES		Timber/Pole									
			1-Story	11. WATER										
			2-Story	Municipal										
			Other:	On-Site Well										
			Plus Basement	8. USE		Seasonal	Permanent	Other:						

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. NR151 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 whis 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 reverse side of the last ply 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.**

FEES:	ISSUING JURISDICTION	Municipality # of Dwelling Location _____		
	PERMIT(S) ISSUED	WIS PERMIT SEAL #	PERMIT ISSUED BY:	
	Zoning _____		Name _____	
	Construction _____		Date _____	Tel # _____
	Electric _____		Cert No. _____	
	Plumbing _____		Email: _____	
	HVAC _____		Zoning _____	
	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.

(Part of Ply 4 for Applicants)

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 Safety and Buildings. Contractors are also required to only subcontract with contractors that hold the appropriate contractor credentials.



Work shall not proceed until the inspector has approved the various stages of construction or two business days have elapsed since the day of inspection request. This permit will expire **24 months** after the date of issuance if the building's exterior has not been completed. **Keep this card posted until final inspection has been made.** (WI Stats. 101.63)

WISCONSIN UNIFORM BUILDING PERMIT[#]

Affix uniform permit seal here (when applicable)
Seal No.: _____

Constr HVAC Elect Plumb Erosion

Project:

INSPECTIONS			
PHASE	ROUGH	FINAL	EROSION
FOOTING			
FOUNDATION			
BSMT DRAIN TILES			
CONSTRUCTION			
PLUMBING			
HEAT/VENT/AC			
ELECTRICAL			
INSULATION			
OCCUPANCY			

Issued To	OWNER (AGENT)	PHONE
	BUILDING SITE ADDRESS	
	CITY, VILLAGE, TOWN	

CONTRACTORS		
NAME	CREDENTIAL #	PHONE
G.C.		
HVAC		
PLBG		
ELECT.		
Master ELECT.		

Issued by	PERSON ISSUING	CERT. NO.
	DATE ISSUED	TELEPHONE

Comments: _____

NOTICE OF NONCOMPLIANCE: This issuing jurisdiction shall notify the applicant in writing of any violations to be corrected. All cited violations, except erosion control ones, shall be corrected within 30 days of notification, unless extension time is granted.

IMPORTANT NOTICE

The work you are doing under this permit must be inspected!

Inspections for the following must be made **BEFORE** proceeding to the next phase:

- 1. Footings** (forms in place, prior to pouring concrete).
- 2. Foundation** (drain tile and stone in place, insulation if required, prior to backfill).
- 3. Underfloor plumbing** (piping installed and on test).
- 4. Basement floor** (vapor barrier, drain tile, and sump crock in place prior to pouring concrete).
- 5. Rough construction, electrical, plumbing and HVAC** (work completed prior insulation).
- 6. Electrical service.**
- 7. Insulation** (insulation and vapor barrier installed, before drywall).
- 8. Final Inspection** (all phases and trades completed, prior to occupancy).

CALL FOR INSPECTIONS AT

**CALL BEFORE 9 AM FOR SAME DAY INSPECTIONS
YOU MUST HAVE PERMIT #, & ADDRESS AVAILABLE**

PERMIT #

PROJECT ADDRESS

UDC INSPECTOR

INSPECTOR PHONE #

Checkout our Website for Helpful Building information & tips, & building code information.

www.cityofgreenlake.com/building_inspector.htm

email us at:

Based on the Uniform Dwelling Code SPS 320-325 your building plans have been **CONDITIONALLY APPROVED** and subject to the following conditions and all notes on plans and survey. **This list is not to be considered all-inclusive.** The complete code is available online at: <http://www.commerce.state.wi.us/SB/SB-DivCodes.html> or call 1-800-DOC-SALES

- POST BUILDING PERMIT CARD IN A CONSPICUOUS PLACE AT THE BUILDING SITE
- POST ADDRESS NUMBERS IN A CONSPICUOUS PLACE AND PER LOCAL ORDINANCE
- PROVIDE CONTRACTOR WITH THE APPROVED PLAN AND THESE CONDITIONS OF APPROVAL.
- **PLEASE CANCEL/RESCHEDULE INSPECTION WHEN NOT READY TO AVOID REINSPECTION FEE.**

Foundation insulation shall be R-_____ from _____ to _____ and window R-values shall be _____ per the thermal performance data submitted with plans.

- Please provide **safe** means (approved ladder, etc.) to access areas for which an inspection request is made.
- Footings shall comply with SPS 321.15 and verification shall be provided if requested.
- All footings, foundations and lintels shall be installed min. 48" below grade. SPS 321.16.
- Drain tile installation is required per SPS 321.17.
- Structures including garages shall be anchored to foundation per SPS 321.18(1)(c).
- Foundation wall reinforcement shall be provided per SPS 321.18(2) & (3) and shall be inspected before concealment per SPS 320.10.
- Back fill for garage and basement floors shall be clean sand, gravel or crushed stone per SPS 321.20.
- Spans and loads shall be determined by structural analysis or the provisions of SPS 321.
- Provide make-up air for exhaust fans per SPS 323.02(3).
- Garage door headers shall be engineered components or per SPS 321.25(3).
- Do not stack shingles over 4 bundles high on trusses when loading. Do not drop.
- Bedroom windows shall conform to SPS 321.03(6), min. clear opening size of 20" x 24".
- Exterior wall shall be braced at the corners according to SPS 321.25(8).
- Joints in top plate shall be separated by 2 (two) stud spaces min. First top plate must join over studs. SPS 321.25(2).
- Smoke detectors shall be installed per SPS 321.09, hard wired, interconnected, with battery backup.
- Provide fire blocking per SPS 321.085.
- Fans shall terminate at the exterior of the building per SPS 323.02(3).
- Stairs, ladders, and ramps shall comply with SPS 321.04, 321.042, and 321.045.
- Seal penetrations in top and bottom plates in wall **prior** to insulating per SPS 322.37(3).
- Air leakage and joint penetration sealing shall conform to SPS 322.37.
- Attic ventilation per SPS 322.39.
- Provide attic scuttle per SPS 321.07, SPS 321.08.
- Light and vent shall be provided per SPS 321.05.
- Notching and boring shall comply with SPS 321.22, 321.25 and 321.27.
- Vapor retarder requirement per SPS 322.38.
- Fireplaces shall comply with subchapter SPS 321.29 - 321.32.
- The requirements of the thermal performance (heat calcs) data submitted shall be followed.
- Window and door (fenestration) rating and labeling per SPS 322.36. **DO NOT REMOVE LABELS**
- Doors used as exits (min 2'-8" door) shall have at minimum a 36" x 36" landing with no greater than an 8 inch riser(s).
- Sliding doors used as the required second exit shall have 2'-6" clear opening width.
- Insulation installation and identification shall be applied according to SPS 322.20.
- Glazing shall consist of safety glass as required by SPS 321.05(3).
- Recessed lighting fixtures shall conform to SPS 322.37.
- Pipe and duct insulation shall be provided per SPS 322.42, 322.43 and 322.44.
- LVL beams may follow engineered specs.
- Provide a copy of manufacturer's specs/structural analysis on all trusses, engineered components, repairs and a copy of the thermal performance data on site at all times.
- Electrical Panel must be removed by responsible party before final inspection and then reinstalled after inspection.
- Carbon Monoxide detectors shall be installed per SPS 321.097 hard wired, interconnected, with battery backup.

Contractor/Homeowner _____

INSPECTION REPORT AND NOTICE OF NONCOMPLIANCE

Tgr qt v'F cvg<	Kpur gevq'P cvg	Reto k'P q0<	Ucv'Ugcn%	Rctegr'P q<
Rtqlgev'Cff tguu	Uvdf kxlkq	Nqv'P q0<	Dtqeni'P q0<	

Kpur gevq	<input type="checkbox"/> Hq qv'pi	<input type="checkbox"/> Gt qkq'P eqptqn	<input type="checkbox"/> Hqwpf cvkq	<input type="checkbox"/> Duo v'F tclp'Vkg	<input type="checkbox"/> Wpf gtu'rd'Rndi	<input type="checkbox"/> Tqwi j 'J XCE
V{r g'u<	<input type="checkbox"/> Tqwi j 'Rnwo dlpi	<input type="checkbox"/> Tqwi j 'Ggvt'ecn	<input type="checkbox"/> Eqpnt wekq	<input type="checkbox"/> Kpuw'cvkq Kpgti {	<input type="checkbox"/> Hkpcn	<input type="checkbox"/> Qvj gt<

Ctgc'Kpur gev'f . 'hi'Rctv'kri'Kpur gev'q'p<	KHkpcn'Kpur gev'q'p. 'Qeew cpe { 'O c { -< <input type="checkbox"/> 'Vcng' Rrceg' P qy " <input type="checkbox"/> 'Vcng' Rrceg' Vgo r qtctkn' 'hqt'aaaaa'f c { u <input type="checkbox"/> 'P qv'Vcng' Rrceg' Wpki'Vj g' Kgo u'Dgrny 'Ctg' Eqttge'vf 'cpf' 'Kpur gev'f <input type="checkbox"/> 'Qvj gt<
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Owner:	Contractor:

CP "P URGEVIQP "QH'VJ G'CDQXG'RTGO KUGU'J CU'F KUENQUGF "VJ G'HQNNQY KPI 'P QPEQO RNKCP EGU" None Noted

QTF GT P Q0	EQF G'UGEVIQP	Hk'F KPI UC'PF 'TGS WK'GO GP VU

IMPORTANT: Rrgcug'tgr qt v'y j gp'xlqrv'kqu'ctg'eqttge'vf 0"CXQK 'F GNC[

NOTICE OF NONCOMPLIANCE: All cited violations shall be corrected within 30 days after written notification unless an extension of time is granted. Each day that the violation continues after notice shall constitute a separate offense and is subject to remedies and penalties by the authority having jurisdiction. Appeals per ch. 68, WI Stats. and s. Comm 20.21.

Gphqtelpi <input type="checkbox"/> Vqy p <input type="checkbox"/> Xknci g <input type="checkbox"/> Ek{ <input type="checkbox"/> Eqwpf OF:	Dif i 'Nqecv'q'P O wpk%	Cwj qtk' D{ 'O wplek cil'Qtf kpcpeg Ugev'q'p<
Lxtklf levkq'p< <input type="checkbox"/> Ucv'Uchh" <input type="checkbox"/> Ucv'Kpur 'Ci gpe{ %//	

Kpur gev'q'p'P co g<	Xlqrv'kqu'Gzr r'kpgf 'Vq<	Eqo r r'kpeg'F cvg<
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Kpur gev'q'p'Cff tguu<	Qh'eg'J qwtu<	Vgnr j qp'P q<
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Qtf gtu'Tghettg'f 'hqt' Hqmy wr 'Ngi crn'Ce'v'q'p Vq<	F cvg	P qpeqo r r'kpegu'Xgth'k'f "v'U'kmi'Gzku'vA *K'p'ggf gf . 'pq'cv'g'qtf gtu'cdqxg0+ <input type="checkbox"/> 'I gu' <input type="checkbox"/> P q	Cf f k'k'q'cni'Hggu'Eqm'ge'vf *+ 'ff ghwpf gf */+ D{ 'Ucv'Eq'p'v'ce'vf 'Ci gpe{ ""'& Upeg'Qt'ki kpcr'Reto k'Ku'w'peg<
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F knt'kd'w'k'q'p' Rn { '3'o'Eq'p't'ce'vt" Rn { '4'o'Kpur gev'q't Ucv'g'" Rn { '5'/'Qy pgt'" Rn { '6'/'Hkq



WIRING STATEMENT—CERTIFICATE OF ELECTRIC INSPECTION

Interstate Power & Light & Wisconsin Power & Light are Alliant Energy Companies

<input type="checkbox"/> Wiring Statement	Customer Name		Owner of Premise	
<input type="checkbox"/> Certificate of Electric Inspection				
Service Address		City	State WI	Zip Code
Inspector's Name			Inspector's Phone #	
Inspection Date	Firm/Electrical Contractor's Name	Phone #		
Inspector Certification #	Firm/Electrical Contractor's Address	City, State, Zip Code		
Contractor Registration #	Electrician License #	Master Electrician Phone #		
TYPE OF SERVICE:				
<input type="checkbox"/> Residence	<input type="checkbox"/> New Service	<input type="checkbox"/> Underground	<input type="checkbox"/> 1 - Phase Service	AMPS
<input type="checkbox"/> Farm	<input type="checkbox"/> Temp Service	<input type="checkbox"/> Overhead	<input type="checkbox"/> 3 - Phase Service	AMPS
<input type="checkbox"/> Commercial	<input type="checkbox"/> Rewire	<input type="checkbox"/> Center Yard Pole	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Industrial	<input type="checkbox"/> Other			

This is to certify that I have examined the wiring for electricity and it is in compliance with the State Electric Code.

Electrician or Inspector Signature *John Luet* Date _____
 Print Name _____

*****IMPORTANT: Before electricity can be furnished, this form must be signed by the electrician or electrical inspector having jurisdiction, and returned to Alliant Energy.**

Permit # _____ **INSPECTION REPORT** Date / Time Requested _____

Municipality: _____ Site Address _____

Project to be Inspected: Service Comm NSFD Addition Deck Alteration Other

Means of Access _____

Building	Plumbing	Electrical	HVAC	Erosion Control
Footing	Rough	Rough	Rough	
Foundation	Test On	Service	Re-Inspect	Final
Rough	Underfloor	New Rewire	Final	
Insulation	OS Sewer	AMPS _____		
Bsmt. Floor	Re-Inspect	Temp Perm	UG OH	
Re-Inspect	Final	Phase S 3ph	Power Company:	
Final		Re-Inspect		
		Final		
Pass	Pass	Pass	Pass	Pass
Fail	Fail	Fail	Fail	Fail

Inspector Note or Comments _____

Inspector Signed _____ Date / Time Inspected _____



City of Clintonville
50 10th St.
Clintonville, WI 54929



City of Clintonville
50 10th St.
Clintonville, WI 54929



TEMPORARY CERTIFICATE OF OCCUPANCY

OWNER:

LOCATION:

BUILDING USE:

BUILDING PERMIT #

CONDITIONS: _____

DATE

BUILDING INSPECTOR



CERTIFICATE OF OCCUPANCY

Certificate of Occupancy is issued for a building located at:

Dwelling Address: _____

Dwelling owner: _____

General Contractor: _____

Type of Occupancy: _____ **Zoning:** _____

Use of the above address is authorized for the occupancy listed. The dwelling is approved for above listed occupancy only, all other uses not specified by the City of Clintonville are hereby prohibited. Conditions listed below are to be corrected prior to owner occupancy.

Conditions:

Findings of a final occupancy inspection are intended to report conditions of non-compliance with Building Code standards that are readily apparent at the time of inspection. Occupancy Inspections do not involve detailed examinations of mechanical systems or the closed structural or nonstructural elements of the building and/or premises. No warranty of the operation, use or durability of equipment and materials is expressed or implied by the issuance of this certificate by the Municipality and/or Building Inspector.

BUILDING INSPECTOR

DATE

