

Submit to non-enforcing municipalities for new 1- and 2- family dwellings

WISCONSIN ADMINISTRATIVE BUILDING
PERMIT APPLICATION
 (Wis. Stats. 101.63 (7) & 101.65 (3))

State of Wisconsin
 Safety and Buildings Division

SEE INSTRUCTIONS ON BACK OF SECOND PLY

Personal information you provide may be used for secondary purposes. [Privacy Law 15.04(1)(m)]

PERMIT APPLICANT							
Last Name		First Name		Middle Initial			
Street Address							
City		State	Zip Code	Telephone No. (Include area code)			
PROJECT LOCATION							
Building Address			Subdivision Name		Lot #	Block #	
Legal Description ___ 1/4, ___ 1/4, Section ___ T ___ N, R ___ E or W				Parcel No.			
1. PROJECT TYPE		2. HVAC EQUIPMENT					
<input type="checkbox"/> 1 Family	<input type="checkbox"/> 2 Family	<input type="checkbox"/> Forced Air Furnace	<input type="checkbox"/> Boiler	<input type="checkbox"/> Radiant Baseboard or Panel	<input type="checkbox"/> Central AC	<input type="checkbox"/> Heat Pump <input type="checkbox"/> Other:	
3. ENERGY SOURCE		Nat. Gas	L.P.	Oil	Elect.	Solid	Solar
Space Heating		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Heating		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. CONSTRUCTION TYPE			5. FOUNDATION				
<input type="checkbox"/> Site Constructed <input type="checkbox"/> Manufactured			<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other (specify):				
6. AREA			7. ESTIMATED BUILDING COST				
Living area =		Square Feet	\$				
<p>I vouch that all the above information is correct, and understand that the issuance of this permit is for administrative purposes only. I understand that onsite construction inspections will not be performed by the municipality, but that the Uniform Dwelling Code, Chapters Comm/ILHR 20-25, still applies to all new 1- and 2-family dwellings and must be complied with. I understand that the issuance of this permit does not relieve me of compliance with other applicable codes and ordinances.</p>							
Applicant's Signature _____				Date Signed _____			
MUST BE COMPLETED BY THE MUNICIPALITY BEFORE FORWARDING PINK PLY TO THE STATE DIVISION OF SAFETY AND BUILDINGS							
ISSUING JURISDICTION:		<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City <input type="checkbox"/> County of:					
MUNICIPALITY NUMBER: <small>of Dwelling Location</small>		# _____ - _____			FEES:		
PERMIT ISSUED BY:					DATE ISSUED:		

INSTRUCTIONS

The owner, builder or agent shall complete and provide all required information on the application form down through the Signature of Applicant block. This data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local administration. **Prior to submitting this application to the municipality, obtain any necessary sanitary or zoning permit from the county.** After completing this application, submit it to the local municipality having jurisdiction. Plan review or building inspections will not be performed by the municipality.

PERMIT REQUESTED:

- Fill in building address.
- Fill in legal description of lot, subdivision name, lot number and block number.

PROJECT DATA:

- Fill in **all numbered** project data blocks (1-7) with the required information. All data blocks must be filled in, including the following:
-

1. **Type** - Check only "1-Family" or "2-Family" if that is what is being built. In other words, do NOT use this form if only a new detached garage is being built, even if it serves a one or two family dwelling.
2. **HVAC Equipment** - Check only the major source of heat, not any supplemental sources. Mark central air conditioning if present. Only check "Radiant Baseboard or Panel" if there is no central source of heat.
6. **Living Area** - Include any finished area including finished areas in basements. For two-family dwellings, include total combined areas.
7. **Estimated Cost** - Include the total cost of construction, but not cost of land or landscaping.

SIGNATURE:

- Sign and date application form.

ISSUING JURISDICTION - This must be completed by the AUTHORITY HAVING JURISDICTION.

Check off MUNICIPALITY STATUS of issuing jurisdiction, such as town, village, city or county.

Fill in MUNICIPALITY NUMBER OF DWELLING LOCATION. If issued by a county, indicate the specific municipality number where the dwelling will be built.

Fill in name of person issuing permit and date building permit issued.

PLEASE FORWARD 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