

APPLICANT- PLEASE DO NOT SEPARATE THIS FORM. Your copy will be returned to you with your permit.

JOHNSON INSPECTION LLC PO Box 127 Arena, WI 53503 Phone: 608-444-0372 johnsoninspection@gmail.com		UNIFORM APPLICATION BUILDING PERMIT		Permit No. _____																						
		Wisconsin Statutes 101.63, 101.73 The information you provide may be used by other government agency programs. [(Privacy Law, S. 15.04 (1)(m))]		Project Description: _____																						
PERMIT REQUESTED		☐ Construction ☐ HVAC ☐ Electric ☐ Plumbing ☐ Erosion Control ☐ Other: _____																								
Owner's Name: _____		Mailing Address: _____		Tel. _____																						
Contractor Name & Type		Lic/Cert#	Mailing Address		Tel. & Fax																					
Dwelling Contractor (Constr.)																										
Dwelling Contr. Qualifier		The Dwelling Contractor Qualifier shall be an Owner, CEO, COB or Employee of the Dwelling Contractor																								
HVAC Contractor's Name:																										
Electrical Contractor's Name:																										
Plumbing Contractor's Name:																										
PROJECT LOCATION		Lot area _____ Sq. ft.	One acre or more of soil will be disturbed _____	_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E (or) W																						
Site Address: _____		Subdivision Name: _____		Lot No. _____	Block No. _____																					
Zoning District(s) _____		Zoning Permit No. _____	Setbacks:	Front _____ ft.	Rear _____ ft.																					
				Left _____ ft.	Right _____ ft.																					
1. PROJECT		3. OCCUPANCY	6. ELECTRICAL	9. HVAC EQUIPMENT	12. ENERGY SOURCE																					
☐ New ☐ Alteration ☐ Addition ☐ Other:		☐ Single Family ☐ Two Family ☐ Commercial ☐ Garage ☐ Other:	Entrance Panel Amps: _____ ☐ Underground ☐ Overhead	☐ Forced Air Furnace ☐ Radiant Baseboard/Panel ☐ Heat Pump ☐ Boiler ☐ Central Air Cond. ☐ Fireplace ☐ Other:	<table border="1"><tr><td>Fuel</td><td>Nat Gas</td><td>LP</td><td>Oil</td><td>Elec</td><td>Solid</td><td>Solar</td></tr><tr><td>Space Htg</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td></tr><tr><td>Water Htg</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td><td>☐</td></tr></table>	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar	Space Htg	☐	☐	☐	☐	☐	☐	Water Htg	☐	☐	☐	☐	☐	☐
Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar																				
Space Htg	☐	☐	☐	☐	☐	☐																				
Water Htg	☐	☐	☐	☐	☐	☐																				
2. AREA INVOLVED		4. CONST. TYPE	7. WALLS	10. SEWER	13. HEAT LOSS																					
Bsm't _____ Sq Ft	☐ Site-Built ☐ Mfd: ☐ WI UDC ☐ U.S. HUD	☐ Wood Frame ☐ Timber/Pole ☐ Steel ☐ ICF ☐ Other:	☐ Municipal ☐ Sanitary Permit No.: _____	_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on WIScheck report)																						
Living Area _____ Sq Ft	5. STORIES	8. USE	11. WATER	14. EST. BUILDING COST w/o LAND																						
Garage _____ Sq Ft	☐ 1-Story ☐ 2-Story ☐ Other: ☐ Plus Basement	☐ Seasonal ☐ Permanent ☐ Other:	☐ Municipal Utility ☐ Private On-Site Well	\$ _____																						
Other _____ Sq Ft																										
Total _____ Sq Ft																										
I understand that I am subject to all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the 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 reverse side of the last ply.																										
APPLICANT'S SIGNATURE _____		DATE SIGNED _____																								
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.																								
ISSUING JURISDICTION		☐ Town of ☐ Village of ☐ City of ☐ County of ☐ State		State Contracted Inspection Agency# _____	Municipality Number of Dwelling Location _____																					
FEES:		INSPECTIONS REQUIRED		WI PERMIT SEAL #	PERMIT ISSUED BY:																					
Plan Review \$ _____	☐ Footing ☐ Foundation ☐ Rough Construction ☐ Rough Electrical ☐ Rough HVAC ☐ Rough Plumbing/test	☐ Underfloor Plumbing/test ☐ OS Sewer Lateral/test ☐ Electric Service ☐ Insulation ☐ Final			Name _____ Date _____ Tel. _____ Cert No. _____																					
Inspection \$ _____																										
WI Seal \$ _____																										
Other \$ _____																										
TOTAL \$ _____																										
RECEIPT:	Check #: _____ From: _____	Rec'd by: _____		Date: _____																						
Distribution ☐ White: File ☐ Yellow: Department of Commerce ☐ Pink: Municipality ☐ Gold: Applicant																										