APPLICANT- ALL INSPECTIONS MUST BE PHONED IN TO 608-459-8800

JOHNSON INSPECTION LLC
P.O. Box 127
Arena, WI 53503
Phone: 608-444-0372
johnsoninspection@gmail.com

UNIFORM APPLICATION
BUILDING PERMIT

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)]

Permit No.

Project Description:

PERMIT REQUESTED ☐Construction ☐HVAC ☐Electric ☐Plumbing ☐Erosion Control ☐Other:

Owner's Name:	Mailing Address:	Tel.

Contractor Name & Type	License# & Expiration	Mailing Address	Phone & Email
Dwelling Contractor (Constr.)			
Dwelling Contr. Qualifier			
HVAC Contractor:			
Electrical Contractor:			
Plumbing Contractor:			

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
☐ New
☐ Alteration ☐ Repair
☐ Addition ☐ Raze
☐ Other: ☐ Move

2. AREA INVOLVED
Bsmt _____Sq Ft
Living Area _____Sq Ft
Garage _____Sq Ft
Other _____Sq Ft
Total _____Sq Ft

3. OCCUPANCY
☐ Single Family
☐ Two Family
☐ Commercial
☐ Garage
☐ Other:

4. CONST. TYPE
☐ Site-Built
☐ Mfd: ☐ WI UDC ☐ U.S. HUD

5. STORIES
☐ 1-Story
☐ 2-Story
☐ Other:
☐ Plus Basement

6. ELECTRICAL
Entrance Panel
Amps: _____
☐ Underground
☐ Overhead

7. WALLS
☐ Wood Frame
☐ Timber/Pole
☐ Steel ☐ ICF
☐ Other:

8. USE
☐ Seasonal
☐ Permanent
☐ Other:

9. HVAC EQUIPMENT
☐ Forced Air Furnace
☐ Radiant Baseboard/Panel
☐ Heat Pump
☐ Boiler
☐ Central Air Cond.
☐ Fireplace
☐ Other:

10. SEWER
☐ Municipal
☐ Sanitary Permit No.:

11. WATER
☐ Municipal Utility
☐ Private On-Site Well

12. ENERGY SOURCE

Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar
Space Htg	☐	☐	☐	☐	☐	☐
Water Htg	☐	☐	☐	☐	☐	☐

13. HEAT LOSS
_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on RES check report)

14. EST. BUILDING COST w/o LAND
$

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 CHP 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.

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:**
TOTAL:	☐Footing ☐Underfloor Plumbing/test ☐Foundation ☐OS Sewer Lateral/test ☐Rough Construction ☐Electric Service ☐Rough Electrical ☐Insulation ☐Rough HVAC ☐Final ☐Rough Plumbing/test		Name: Tracy Johnson Cert No. 664566 Telephone : 608-444-0372 Date:

RECEIPT: Check #:_____ From: _____ Rec'd by: _____ Date: _____