

BUILDING PERMIT

ProCheck Inspections, LLC
 N3587 County Road C
 Pulaski, WI 54162
 920-373-7598
 procheckwi@gmail.com

PLEASE NOTE: THIS PERMIT DOES NOT COVER
 PLUMBING, ELECTRICAL OR HVAC

Permit No. _____
 Parcel No. _____
 Permit Fee _____
 Check No. _____
 Date: _____

Owner/Contractor _____
 Project Type _____ Phone Number _____
 Project Address _____
 Comments _____ Email _____

Application Type		Type of Building	
<input type="checkbox"/> New Building	<input type="checkbox"/> Moving	<input type="checkbox"/> One Family	<input type="checkbox"/> Garage – Attached
<input type="checkbox"/> Addition	<input type="checkbox"/> Siding	<input type="checkbox"/> Two Family	<input type="checkbox"/> Garage – Separate
<input type="checkbox"/> Remodel – Interior	<input type="checkbox"/> Fence	<input type="checkbox"/> Multi-Family	
<input type="checkbox"/> Remodel – Exterior	Other _____	<input type="checkbox"/> Commercial	
<input type="checkbox"/> Deck		<input type="checkbox"/> Other _____	
Estimated \$ _____			

Building Size Information	Set Backs Accessory Building	Lot Information
O.A. Dimension _____ 1 st Floor _____	Front _____	<input type="checkbox"/> Corner
Basement Area _____ 2 nd floor _____	Main Bldg _____	<input type="checkbox"/> Interior
Garage Area _____ 3 rd floor _____	Side Yard _____	Type _____
No. Stories _____ Volume _____	Rear Yard _____	Size _____
Height _____ Total Area _____		Area _____

Main Bldg Setbacks	Type of Construction	Foundation	Type of Foundation
Set Back _____	<input type="checkbox"/> Frame	<input type="checkbox"/> Full Bsmt	<input type="checkbox"/> Concrete
Side Yard _____	<input type="checkbox"/> Masonry	<input type="checkbox"/> Partial Bsmt	<input type="checkbox"/> Block
Side Yard _____	<input type="checkbox"/> Steel	<input type="checkbox"/> Crawl Space	<input type="checkbox"/> Pier Supports-Per Engineering
Rear Yard _____	Exterior Finish _____	<input type="checkbox"/> Frost Wall	<input type="checkbox"/> Steel <input type="checkbox"/> Wood
		<input type="checkbox"/> Concrete Slab	<input type="checkbox"/> Posts No. _____

Contractor _____ Address _____ Telephone _____
 Email _____
 Architect/Designer _____ Address _____ Telephone _____

The undersigned on behalf of itself, and as an authorized agent of the property owner when applicable, agrees to construct the above-described building in accordance with plans and specifications submitted herewith, and in strict compliance with all the provisions of local zoning ordinances and the Building Code of the State of Wisconsin, and to grant permission for periodic reasonable inspectors, including inspections by the Building Inspector and Assessor, as a condition of receiving this permit.

Applicant (signature) _____ Applicant (print) _____
 State DC # _____ State DCQ # _____ Approved by _____

Make payment payable to municipality & send to inspector with application.
APPLICANT SHALL SCHEDULE THE INSPECTION WHERE/WHEN REQUIRED 920-373-7598

PLUMBING PERMIT

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Parcel No. _____
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Check No. _____
Date _____

Owner/Contractor _____
Project Type _____ Phone Number _____
Project Address _____
Comments _____ Email _____

TYPE OF BUILDING		APPLICATION TYPE
<input type="checkbox"/> One Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> New Building
<input type="checkbox"/> Two Family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Remodeling
<input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Other (specify) _____

WATER CLOSETS	CLOTHES WASHERS
WASH BASINS	LAUNDRY TRAYS
BATH TUBS	WATER HEATERS
SHOWER STALLS	FLOOR DRAINS
SINKS	SUMP PUMPS
DISPOSALS	WHIRLPOOL TUBS
DISHWASHERS	URINALS
GREASE INTERCEPTORS	BAR SINKS
DRAIN TILE RECEIVERS	GARAGE DRAINS
SITE DRAINS	OTHER

Applicant hereby agrees to perform work pursuant to local and state plumbing code.

Licensed Master Plumber (Print) _____ License No. _____ Estimated Cost _____
Signature of Applicant _____ Date _____
Plumbing Contractor _____ Contractor Telephone Number _____
Contractor Mailing Address _____ Plumbing Inspector _____
City _____ State _____ ZIP _____

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All inspections must be scheduled for time of installation 920-373-7598

HVAC PERMIT

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Permit No. _____
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 Check No. _____
 Date _____

Owner/Contractor _____

Project Type _____ Phone Number _____

Project Address _____

Comments _____ Email _____

TYPE OF BUILDING		TYPE & QUANTITY OF INSTALLATION	
<input type="checkbox"/> One Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Two Family <input type="checkbox"/> Commercial <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Air Conditioning _____ <input type="checkbox"/> Oil Boilers _____ <input type="checkbox"/> Air Handler _____ <input type="checkbox"/> Rooftop _____ <input type="checkbox"/> Gas Boilers _____ <input type="checkbox"/> Unit Heaters _____ <input type="checkbox"/> Gas Furnace _____ <input type="checkbox"/> Oil Furnace _____ <input type="checkbox"/> Other (specify) _____		

TOTAL B.T.U.

Heating: _____ (List in B.T.U.'s) Air Conditioning: _____ (List in B.T.U.'s)

Air Conditioning Electrician: _____

Applicant hereby agrees to perform work pursuant to local and state HVAC code.

 Name of License Holder (Print)

 Estimated Cost

 Signature of Applicant

 State HVAC Certification No.

 HVAC Contractor

 Daytime Telephone Number

 Contractor Mailing Address

 HVAC Inspector

 City State ZIP

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ELECTRICAL PERMIT

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 Parcel No. _____
 Permit Fee _____
 Check No. _____
 Date _____

Owner/Contractor _____
 Project Type _____ Phone Number _____
 Project Address _____
 Comments _____ Email _____

TYPE OF BUILDING		APPLICATION TYPE		
<input type="checkbox"/> One Family	<input type="checkbox"/> Multi-Family	<input type="checkbox"/> Separate Garage	<input type="checkbox"/> Rewire	
<input type="checkbox"/> Two Family	<input type="checkbox"/> New Building	<input type="checkbox"/> Pool	<input type="checkbox"/> Basement	<input type="checkbox"/> New
<input type="checkbox"/> Commercial / Industrial		<input type="checkbox"/> Hot Tub	<input type="checkbox"/> Remodel	<input type="checkbox"/> Demo
<input type="checkbox"/> Other (specify) _____		<input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Other _____	

CLASS OF SERVICE			
<input type="checkbox"/> New	Meters Required _____	<input type="checkbox"/> Single Phase	<input type="checkbox"/> Two Wire
<input type="checkbox"/> Service Change	Amp _____	<input type="checkbox"/> Three Phase	<input type="checkbox"/> Three Wire
<input type="checkbox"/> Temporary	Voltage _____		<input type="checkbox"/> Four Wire

List a brief description of the work and the areas where the work will be conducted:

Applicant hereby agrees to perform work pursuant to local and state Electrical Codes.

Licensed Master Electrician (Print) _____	License No. _____
Signature of Applicant _____	Estimated Cost _____
Electrical Contractor _____	Date _____
Contractor Mailing Address _____	Contractor Telephone Number _____
City _____ State _____ ZIP _____	Electrical Inspector _____

Make payment payable to municipality & send to inspector with application.

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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 and More Acre of Soil

I understand that this project is subject to Ch. NR 151 regarding additional erosion control and storm water management and will comply with those standards.

Date: _____
Owner's Signature:

Date: _____
Building Inspector

Contractor Credential Requirements

All contractors shall possess an appropriate contractor credential issued by the Wisconsin Department of Safety and Professional Services. Contractors are also required to only subcontract with contractors that hold the appropriate contractor credentials.

CONSTRUCTION DEPOSIT AGREEMENT

The undersigned does hereby deposit the sum of one thousand dollars (\$1,000) with the Town to be used as a Construction Deposit. This deposit is to be held in escrow and used for any damages to Town property and other fees determined necessary by the Town; these other fees to include re-inspections, street cleaning and occupancy without permit. These fees are noted on the permit fee schedules and are subject to occasional updating as may become necessary. Note that each day of occupancy without a permit is a separate offense and may be fined as such.

This deposit shall constitute an agreement on the part of the primary permit holder to assume financial responsibility on behalf of all persons directly or indirectly employed in the work for which a permit is secured. By signing hereunder, the undersigned hereby authorizes the Town to deduct from this deposit any amount needed to correct damages or other assessed fees as stated above. In so executing this document, the undersigned acknowledges that the undersigned will pay within ten (10) days any sums due and owing to the Town resulting from charges in excess of the one thousand dollars (\$1,000) deposit made hereunder. If default of payment occurs, it is further understood that any cost of the Town shall be assessed against said property in the form of a special assessment on the property taxes.

In so executing the document, the undersigned authorizes the building inspector for the Town to stop any further construction by the undersigned in the Town until such time as the one thousand dollar (\$1,000) deposit has been replenished.

In so executing this document, the undersigned binds the undersigned, said undersigned's heirs, assigns and transferees in interest.

Dated this _____ Day of _____ Year _____

Name of Owner or Contractor or Authorized Officer:

(Please Print) _____
First Mi Last

Signature _____

Address _____ Phone _____

Date Paid _____ Received By _____

Completion Date-Final Inspection _____ Ok By _____

Payable To: Name and Adress _____

Refunded By: _____ Date _____ Amount _____

Amount Deducted _____ Reason _____

Job Location _____