

Residential Permit Application

Additions- Remodels- General Repairs

Building Electrical Plumbing HVAC

Location _____	Permit #	
Owner _____	Date	
Address _____	City _____	Zip _____
Phone _____	Email _____	
Parcel # _____	Zoning _____	
Contractor _____		
Address _____	City _____	Zip _____
Phone _____	Email _____	
License # _____	Contact Person _____	

Project Description

Description of Project _____ Cost \$ _____

Sq. Ft of Project _____

Project Type	
Additions-All Inclusive*	\$ 270.00
Remodel-All Inclusive*-Cost=>\$10,000	\$ 250.00
Remodel-All Inclusive*-Cost<\$10,000	\$ 200.00
Attached Garage-All Inclusive*	\$ 200.00
Unattached Garage/ Acc. Bldg.	\$ 100.00
Unattached Garage/ Acc. Bldg. w/ Electrical	\$ 150.00
Basement Finish	\$ 250.00
Electrical: Service (Overhead / Underground)	\$ 100.00
General Wiring	\$ 100.00
HVAC Furnace/ A-C Change	\$ 100.00
Plumbing	\$ 100.00
Deck-All Inclusive*+ Zoning Fee	\$ 200.00
Window Replacement	\$ 100.00
Misc. Permit	\$ 100.00
Misc. Permit/ Roof Replacement	\$ 50.00
Total	
Additional Permits if Applicable	
County Land Use: Sheboygan County	Yes No
Sanitary Permit- Sheboygan County	Yes No



All Inclusive*-
Construction; HVAC; Electrical & Plumbing Permits

Make Check Payable to:
 Town of Greenbush

Mail Application with payment to:
*Witkowski Inspection Agency, LLC
 632 Fremont Street Ste. 105
 Kiel, WI 53042*

For Inspections Call:
 Witkowski Inspection Agency, LLC
 Brian Witkowski
 Office: 920-286-6133
 Cell: 920-912-0832

Inspections Required

Footing _____	Electrical Service _____	X	Erosion Control _____	Insulation _____
Foundation _____	U-G Plumbing _____		Rough-In** _____	Final _____

Rough-In** Includes: Construction; Electrical; Plumbing; HVAC

Electrical- Plumbing- HVAC Permit Applications

Electrical Permit:	Company _____	Phone # _____																																			
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">New Service</td> <td style="width: 10%;">OH</td> <td style="width: 10%;">UG</td> <td style="width: 50%;"></td> </tr> <tr> <td>Service Change</td> <td>OH</td> <td>UG</td> <td>OH to UG</td> </tr> <tr> <td>All Services</td> <td colspan="3">Volts/ Amps _____</td> </tr> <tr> <td></td> <td colspan="3">Number of Meters _____</td> </tr> <tr> <td></td> <td colspan="3">Service Utility _____</td> </tr> <tr> <td></td> <td colspan="3">Phase _____</td> </tr> <tr> <td>Remodel</td> <td colspan="3">Location of Service _____</td> </tr> <tr> <td>Outbuilding</td> <td colspan="3">_____</td> </tr> <tr> <td>Alternative Energy Installation</td> <td colspan="3">_____</td> </tr> </table>	New Service	OH	UG		Service Change	OH	UG	OH to UG	All Services	Volts/ Amps _____				Number of Meters _____				Service Utility _____				Phase _____			Remodel	Location of Service _____			Outbuilding	_____			Alternative Energy Installation	_____		
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Signature of Licensed Electrician _____ **License #** _____

Plumbing Permit:	Company _____	Phone # _____
_____ Floor Drains	_____ Sump Pump	_____ Sinks
_____ Dishwasher	_____ Hose Bibs	_____ Lav's
_____ Showers	_____ Water Softener	_____ Bath Tub
_____ Garbage Disposal	_____ Other	_____ Water Closets
_____ Bar Connection	_____ Other	_____ Laundry Box

ALL TESTS ON ROUGH INSTALLATIONS AS PER WIS. PLUMBING CODE. ALL INFORMATION ON THIS PERMIT IS PURSUANT TO THE WISCONSIN STATUTE 145.06(1)(A), STATING THAT PLUMBING WORK MUST BE PERFORMED BY A CONTRACTING MASTER PLUMBER. The applicant agrees to comply with the Wisconsin Uniform Dwelling Code and other Municipal Ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, expressed or implied on the Department or Municipality, certifies that all the information is accurate. I the undersigned hereby applies for a permit for the execution and of installation of Plumbing as herein described.

Signature of Master Plumber _____ **License #** _____

HVAC Permit	Company _____	Phone # _____
_____ New Furnace	_____ Fireplace or Wood Burner	
_____ New Boiler	_____ Replacement of Equipment	
_____ Unit Heater(s)	_____ Air Conditioning	
_____ Roof Top Unit(s)	_____ Ventilation	
_____ Addition to existing system	_____ Other	

Description of Work _____

Type of Fuel _____

Calculated BTU Heat Loss _____

Size of Unit (BTU Rating) _____ Output _____ Input _____

The undersigned certifies that all of the above information is correct, and applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions set forth herein; and it is further agreed that such work will be done in strict compliance with the Wisconsin Heating/ Cooling/ Ventilation Code as in SPS 322.01 & 323.01

Signature of HVAC Contractor _____ **License #** _____

Cautionary Statement:

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 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.

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.

ATCP 110 For consumer protection and Lien Waiver Law's.

I, hereby certify that I have read the Cautionary Statement and understand and agree to abide by the following special regulations and provisions of this permit and all applicable provisions and restrictions which are shown on this application.

Signature _____

Date _____