WI Div. of Safety and Buildings Wisconsin Stats. 101.63, 101.73 **Permit fees are not refundable.** **Building Plans must be provided**	**TREMPEALEAU COUNTY LAND USE AND UNIFORM BUILDING PERMIT APPLICATION** **Trempealeau Co. Dept. of Land Management** **P.O. Box 67, Whitehall, WI 54773 (715)538-2311 Ext. 223**	Permit No. State Upload Code Tax Parcel No.

PERMIT REQUESTED	☐LAND USE ☐BUILDING CONSTRUCTION

Owner's Name	Mailing Address	E-Mail address	Tel.
Dwelling Contractor's (Constr.) Name	Lic/Cert# Exp. Date	Mailing Address	Tel.
Dwelling Contr. Qualifier:	Lic/Cert# Exp. Date	The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.	Tel.
HVAC Contractor's Name:	Lic/Cert# Exp. Date	Mailing Address	Tel.
Electrical Contractor's Name:	Lic/Cert# Exp. Date	Mailing Address	Tel.
Plumbing Contractor's Name:	Lic/Cert# Exp. Date	Mailing Address	Tel.

PROJECT LOCATION	Lot area Sq. ft.	☐One or acre or more of soil will be disturbed	☐Town ☐Village ☐ City of	_____ 1/4, _____ 1/4, of Section ____, T ____ N, R ____ E/W

Building Address	Subdivision Name	Lot No.	Block No.

Job Description	**Zoning District**	**Setbacks:**	Roadside ft.	Rear ft.	Left ft.	Right ft.

1. PROJECT
☐New ☐Move
☐Addition
☐Conversion of existing building to a dwelling
☐Remodel
☐Other:

2. AREA INVOLVED
Bsmt _____Sq Ft
Living Area _____Sq Ft
Garage _____Sq Ft
Deck _____Sq Ft.
Other _____Sq Ft
Totals_____Sq Ft

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

4. CONST. TYPE
☐Site-Built
☐Mfd per WI UDC
☐U.S. HUD (w/o basement)
☐U.S. HUD (plus basement)

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

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

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

8. USE
☐Seasonal
☐Permanent

9. HVAC EQUIPMENT
(Primary System only)
☐Forced Air Furnace
☐Radiant Based/ Panel
☐Heat Pump
☐Boiler
☐Central Air Cond.
☐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
Prescriptive Method Used ☐
_____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from :Total Building Heating Load" on Rescheck report)

14. EST. BUILDING COST
$

8a FOUNDATION
☐Concrete Slab ☐Masonry Walls ☐Concrete Piers ☐Poured Walls ☐Frost Walls
☐Insulated Concrete Forms ☐Treated Wood ☐Other

Is your property enrolled in the Wisconsin Farmland Preservation Program? ___☐___ Yes ___☐___ No

Is your property enrolled in the Wisconsin Managed Forest or Forest Crop Program? ___☐___ Yes ___☐___ No

I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of this form; am subject to any conditions of this permit; understand that the issuance of this 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 building 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 page 2 of this application.**

APPLICANT (Print)_____SIGNATURE_____DATE:_____

MUNICIPALITY ACKNOWLEDGEMENT* _____**DATE:**_____

* Required for all permits – must be signed by town or city official prior to presentation and payment at the County office.

Note: (For Towns-If driveway has been approved – please initial in the box) ☐

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. ☐ If box is checked, see any additional conditions of approval on Page 3*

ISSUING JURISDICTION –Trempealeau County **Zoning Approval** _____Date:_____ **Building approval** _____Date:_____	State – Contracted Inspection Agency # **WI Permit Seal Number**	Municipality Number of Dwelling Location 6 1 - ___ ___ ___ **Total Fees Paid**: **Receipt Number:**

STRUCTURAL SETBACK REQUIREMENTS FROM ROADWAYS, STREAMS, LOTLINES

HIGHWAYS	**MINIMUM SETBACK REQUIRED, WHICHEVER IS GREATER**
State Highway	**110' from Centerline or 50' from Right of Way**
County Highway	**75' from Centerline or 42' from Right of Way**
Township Road	**63' from Centerline or 30' from Right of Way**
STREAMS	**75' from Ordinary High Water Mark**
REAR YARD LOT LINE:	**Minimum 10 Feet**
SIDE YARD LOT LINE:	**Minimum 10 Feet**

SHOW A SKETCH OF THE FOLLOWING INFORMATION: Indicate North, dimensions of Lot; location of buildings from lot lines; centerline of abutting highway and high water mark of any abutting water course; well location; and location of septic system.

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 http://dhs.wisconsin.gov/lead/WisconsinRRPRule.htm 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 or More Acre of Soil

Note: If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

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

APPLICANT (Print)_____SIGN:_____DATE:_____

*Additional conditions of approval_____

_____

_____

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