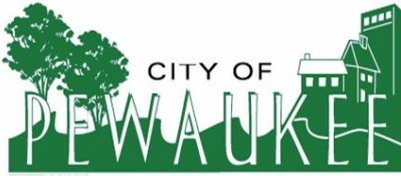


W240 N3065 Pewaukee Road Phone – 262-691-9107 Fax – 262-691-6039 buildingservices@pewaukee.wi.us		COMMERCIAL BUILDING PERMIT APPLICATION CITY or VILLAGE OF PEWAUKEE *NOTE*: All Highlighted Areas must be completed				Permit No. _____	
						Parcel No. _____	
Building Type _____			Use _____			Erosion Control Permit No. _____	
Building Site Address: _____						Lot No. _____	
Owner's Name: _____		Mailing Address _____				Tel. _____	
		Email Address _____				Cell# _____	
Tenant's Name: _____		Mailing Address _____				Tel. _____	
		Email Address _____				Cell# _____	
Contractor's Name: _____		Mailing Address _____				Tel. _____	
Contractor License #/Expiration Date _____		Email Address _____				Cell# _____	
PROJECT DESCRIPTION							
SITE INFORMATION		Total Lot area _____ Sq. ft.		Bldg Footprint Area _____ Sq. Ft.		All Hard Surfaces _____ Sq. Ft.	Green Space Area _____ Sq. Ft.
Zoning District(s) _____		Subdivision Name _____			Is this property within 1000 feet of a lake or 300 feet of a stream/river? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Sanitary Permit No. _____		Zoning Permit No. _____		Set backs	Front _____ ft.	Rear _____ ft.	Side Left _____ ft.
							Side Right _____ ft.
1. PROJECT		2. STORIES		3. FOUNDATION		4. SEWER	
<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Other: _____	<input type="checkbox"/> Repair <input type="checkbox"/> Raze <input type="checkbox"/> Move	<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other: _____	<input type="checkbox"/> Municipal <input type="checkbox"/> Private System	<input type="checkbox"/> Municipal Utility <input type="checkbox"/> Private On-Site Well		
				13. MULTI FAMILY BUILDINGS		MULTI TENANT BUILDINGS	
6. AREA INVOLVED		COMMERCIAL		No. of 1 Bedroom Units _____		No. of Tenant Spaces _____	
				No. of 2 Bedroom Units _____			
				No. of 3 Bedroom Units _____			
				14. FIRE SPRINKLER SYSTEM			
				<input type="checkbox"/> Wet System <input type="checkbox"/> Dry System			
				Area Serviced Wet _____		Area Serviced Dry _____	
				15. ESTIMATED BUILDING COST \$ _____			
I agree to comply with 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. 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. No refunds issued after work has begun. By applying for this permit, you are authorizing City personnel to inspect this property within the scope of their duties.							
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. <input type="checkbox"/> See below for conditions of approval.					
Land Disturbance over one (1) acre will require a DNR "Notice of Intent" to be completed						Municipality Number of Dwelling Location _____	
PERMIT FEES:		BONDS		OTHER		PERMIT ISSUED BY:	
Permit \$ _____	Other \$ _____	Total Fee \$ _____	Occupancy Bond \$ _____	Impact Fee \$ _____		Name _____	Cert No. _____ Date _____



Building Services Department
 W240 N3065 Pewaukee Road
 Pewaukee, WI 53072
 (262) 691-9107 Fax: (262) 691-6039



NON RESIDENTIAL/COMMERCIAL BUILDING PERMIT FEE WORKSHEET

OWNER: _____

PHONE: _____

SITE ADDRESS: _____

<u>DESCRIPTION</u>	<u>FEE</u>	
NON RESIDENTIAL BUILDINGS		
1. <u>Minimum Permit Fee All Permits/Per Inspection</u>	\$100.00/inspection	_____
2. <u>New Non - Residential Buildings/Additions</u>	Base/Plan Review fee	_____
Unfinished Areas/Warehouse Areas, Shells	\$400.00 base fee plus	_____
	_____\$0.25/sq ft/fl	_____
Finished Areas, Office, Retail, etc.	Base/Plan Review fee	_____
	\$400.00 base fee plus	_____
	_____\$0.35/sq ft/fl	_____
3. <u>Remodel/Alterations/Build-outs</u>	Base/Plan Review fee	_____
	\$250.00/base fee plus	_____
	_____\$0.30/sq ft/fl	_____
4. <u>Detached Accessory Building and/or Structures</u>	Base/Plan Review Fee	_____
	\$200.00 base fee plus	_____
	____x\$0.25/sq ft/fl	_____
5. <u>Agricultural Buildings and Additions</u>	_____\$0.25/sq ft/fl	_____
6. <u>Early Start</u>	\$300.00	_____
7. <u>Occupancy Certification</u>	\$100.00	_____

	SUBTOTAL	_____
	* Fees tripled if work started without permit	=====
	TOTAL AMOUNT DUE	_____

**** BONDS AND IMPACT FEES MAY APPLY TO YOUR PROJECT - CALL BUILDING SERVICES FOR ASSISTANCE**