

W240 N3065 Pewaukee Road Phone – 262-691-9107 Fax- 262-691-6039 Email: buildingservices@pewaukee.wi.us NOTE*: All Highlighted Areas must be completed	BUILDING PERMIT APPLICATION CITY or VILLAGE OF PEWAUKEE	Permit No. _____ Parcel No. _____
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Building Type _____	Use _____
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Building Site Address: _____	Lot No. _____
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Owner's Name:	Mailing Address _____	Tel. _____
	Email Address _____	Cell# _____

Tenant's Name:	Mailing Address _____	Tel. _____
	Email Address _____	Cell# _____

Contractor Name:	Mailing Address _____	Tel. _____
	Email Address _____	Cell# _____

If a Contractor is listed to do the work, a license is required to work in the State of Wisconsin

Dwelling Qualifier License # _____ **License Expiration Date** _____

Dwelling Contractor License # _____ **License Expiration Date** _____

PROJECT DESCRIPTION

Area of Disturbed Soils? _____	Subdivision Name _____	Zoning District _____
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PROJECT	STORIES	FOUNDATION	CONST TYPE	WALLS	USE	OCCUPANCY	SEWER	
<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Shed (>120sqft)	<input type="checkbox"/> Reroof <input type="checkbox"/> Reside <input type="checkbox"/> Deck <input type="checkbox"/> Pool	<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other <input type="checkbox"/> Plus <input type="checkbox"/> Basement	<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other:	<input type="checkbox"/> Site Built <input type="checkbox"/> Mfd WI UDC <input type="checkbox"/> Mfd US HUD	<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Other:	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other	<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other:	<input type="checkbox"/> Municipal <input type="checkbox"/> Private sys. WATER <input type="checkbox"/> Munic. Utility <input type="checkbox"/> Private Well

AREA INVOLVED (sq. ft)			
Area	Unit 1	Unit 2	Total
Unfin Bsmnt			
Finish Bsmnt			
1 st flr Living			
2 nd flr Living			
3 rd flr Living			
Att Garage			
Enc/Open Porch			
Deck			
Other:			
Totals			

HEAT LOSS _____ BTU/HR Total calculated envelope and infiltration losses ("Maximum" on allowable Heating Equipment Output" on Energy Worksheet; " Total building heating Load Res check report

Estimated Cost without Land \$ _____

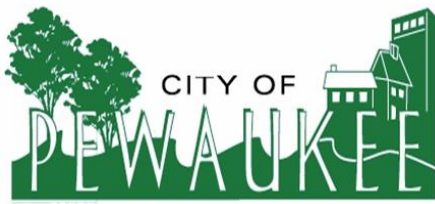
The applicant and property owner(s) hereby certify that: 1) all statements and other information submitted as part of this application are true and correct to the best of applicant's and property owner(s)' knowledge; 2) the applicant and property owner(s) has/have read and understand all information in this application; and 3) the applicant and property owner(s) agree that any approvals based on representations made by them in this Application and its submittal, and any subsequently issued building permits or other type of permits, may be revoked without notice if there is a breach of such representation(s) or any condition(s) of approval.

By execution of this application, the property owner(s) authorize the City of Pewaukee and/or its agents to enter upon the subject property(ies) between the hours of 7:00 a.m. and 7:00 p.m. daily for the purpose of inspection while the application is under review. The property owner(s) grant this authorization even if the property has been posted against trespassing pursuant to Wis. Stat. §943.13

APPLICANT'S SIGNATURE _____	DATE SIGNED _____
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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. See attached list if there are any conditions of approval.

PERMIT FEES: Permit \$ _____ Other \$ _____ Total \$ _____	Municipality # of Dwelling Location	PERMIT ISSUED BY: Name _____ Cert No _____ Date _____
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Building Services Department

W240 N3065 Pewaukee Road
Pewaukee, WI 53072
(262) 691-9107 Fax: (262) 691-6039
buildingservices@pewaukee.wi.us



RESIDENTIAL BUILDING PERMIT FEES WORKSHEET

OWNER: _____

PHONE: _____

SITE ADDRESS: _____

EMAIL ADDRESS: _____

I. RESIDENTIAL BUILDINGS

a. State Seal (this fee will only apply to New Home construction)

FEE
\$43.00

b. New Residential Building & Additions
Finished Areas & Attached Garages

Base/Plan Review fee \$275.00
plus
_____ \$0.35/sq ft/floor

Unfinished Areas- attached decks, porches, unfinished basement, crawl spaces, etc.

Base/Plan Review fee \$275.00
plus
_____ \$0.25/sq ft/floor

c. Detached Accessory Buildings or Structures

Base/Plan Review fee \$120.00
base fee plus
_____ \$0.25/sq ft/floor

d. Remodel and Alteration to Residential Buildings

Base/Plan Review Fee 150.00
base fee plus
_____ x \$0.30/sq ft/fl

e. Occupancy Certification (for new bldg & additions)

_____ \$60.00/unit

f. Minimum Permit Fee All Permits/Per Inspection

\$60.00/inspection

SUBTOTAL

X3: Permit is assessed a triple fee if work is started without permit.

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Total Amount Due
