

## APPLICATIONS FOR ADDITONS, ALTERATIONS OR ZONING PERMIT PROCESS



Date Filed \_\_\_\_\_

Fee Paid \_\_\_\_\_

Fee for Zoning Permit is \_\_\_\_\_

### BUILDING PERMIT PROCESS

Building and/or zoning permits are required for most construction projects in the Village of Montfort. For more information and to get a permit contact the building inspector directly.

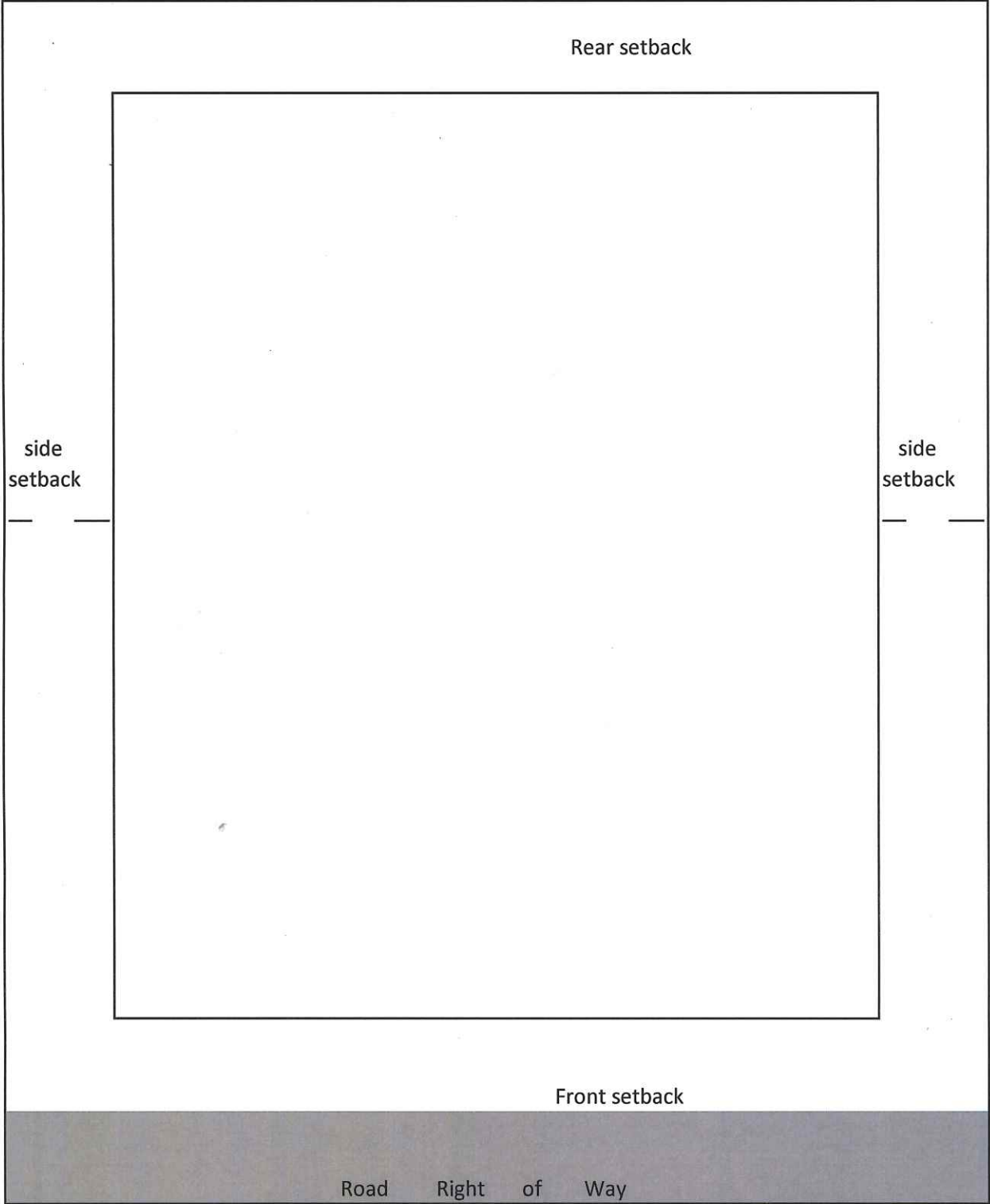
Scott Jelle 608-963-0652 - Building Inspector

To apply for a building or zoning permit you will need the following information.

1. A completed application form including all owner and contractor information. (forms are available online or from the Village Clerk)
2. 2 sets of project plans and other items per project requirements. (In case of simple extensions, alterations, repairs or restorations a simple sketch by the applicant with sufficient explanatory data found may be sufficient by the Zoning Administrator to adequately identify and explain the proposed construction and use.) Use attached plot form for sketch.
3. Site information. Lot size, distance from property lines etc.

Once the above information is submitted to the building inspector, a plan review will be completed and additional information may be requested. Upon approval of the application and plan review, a permit will be issued. Usually within 7 days. Permit fees are determined based on the project and are due at the time of the permit issuance. Inspections will be performed at different stages throughout the project. Information on the required inspections will be given to the permittee when the permit is issued. All required inspections must be called in to the inspector and passed by the inspector before moving to the next stage of the project. A final inspection must be completed prior to occupancy of the project.

APPLICATIONS FOR ADDITONS, ALTERATIONS OR ZONING PERMIT PROCESS



APPLICANT- PLEASE DO NOT SEPARATE THIS FORM. Your copy will be returned to you with your permit.

	UNIFORM APPLICATION BUILDING PERMIT	Permit No. _____
	Wisconsin Statutes 101.63, 101.73 The information you provide may be used by other government agency programs. [(Privacy Law, S. 15.04 (1)(m))]	Project Description: _____

**PERMIT REQUESTED**     Construction    HVAC    Electric    Plumbing    Erosion Control    Other: \_\_\_\_\_

Owner's Name: _____	Mailing Address: _____	Tel. _____
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Contractor Name & Type	Lic/Cert#	Mailing Address	Tel. & Fax
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Dwelling Contractor (Constr.)			
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Dwelling Contr. Qualifier		The Dwelling Contractor Qualifier shall be an Owner, CEO, COB or Employee of the Dwelling Contractor	
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HVAC Contractor's Name:			
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Electrical Contractor's Name:			
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Plumbing Contractor's Name:			
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**PROJECT LOCATION**    Lot area \_\_\_\_\_ Sq. ft.    One acre or more of soil will be disturbed    \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, of Section \_\_\_\_\_, T \_\_\_\_\_ N, R \_\_\_\_\_ E (or) W

Site Address: _____	Subdivision Name: _____	Lot No. _____	Block No. _____
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Zoning District(s)	Zoning Permit No.	<b>Setbacks:</b>	Front _____ ft.	Rear _____ ft.	Left _____ ft.	Right _____ ft.
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1. PROJECT	3. OCCUPANCY	6. ELECTRICAL	9. HVAC EQUIPMENT	12. ENERGY SOURCE																					
<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Addition <input type="checkbox"/> Raze <input type="checkbox"/> Other: <input type="checkbox"/> Move	<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Commercial <input type="checkbox"/> Garage <input type="checkbox"/> Other:	Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead <b>7. WALLS</b> <input type="checkbox"/> Wood Frame <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Other:	<input type="checkbox"/> Forced Air Furnace <input type="checkbox"/> Radiant Baseboard/Panel <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central Air Cond. <input type="checkbox"/> Fireplace <input type="checkbox"/> Other:	<table border="1" style="width:100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <th>Fuel</th> <th>Nat Gas</th> <th>LP</th> <th>Oil</th> <th>Elec</th> <th>Solid</th> <th>Solar</th> </tr> <tr> <td>Space Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Water Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar	Space Htg							Water Htg						
Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar																			
Space Htg																									
Water Htg																									
2. AREA INVOLVED	4. CONST. TYPE	8. USE	10. SEWER	13. HEAT LOSS																					
Bsmt _____ Sq Ft Living Area _____ Sq Ft Garage _____ Sq Ft Other _____ Sq Ft <b>Total</b> _____ Sq Ft	<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd: <input type="checkbox"/> WI UDC <input type="checkbox"/> U.S. HUD <b>5. STORIES</b> <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:	<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit No.: _____ <b>11. WATER</b> <input type="checkbox"/> Municipal Utility <input type="checkbox"/> Private On-Site Well	_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on WIScheck report)																					
				14. EST. BUILDING COST w/o LAND																					
				\$ _____																					

I understand that I am subject to 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. 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 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 the reverse side of the last ply.

**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.  See attached for conditions of approval.

<b>ISSUING JURISDICTION</b>	<input type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <input type="checkbox"/> County of <input type="checkbox"/> State	State Contracted Inspection Agency# _____	Municipality Number of Dwelling Location _____
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FEES:	INSPECTIONS REQUIRED	WI PERMIT SEAL #	PERMIT ISSUED BY:
Plan Review \$ _____ Inspection \$ _____ WI Seal \$ _____ Other \$ _____ <b>TOTAL</b> \$ _____	<input type="checkbox"/> Footing <input type="checkbox"/> Underfloor Plumbing/test <input type="checkbox"/> Foundation <input type="checkbox"/> OS Sewer Lateral/test <input type="checkbox"/> Rough Construction <input type="checkbox"/> Electric Service <input type="checkbox"/> Rough Electrical <input type="checkbox"/> Insulation <input type="checkbox"/> Rough HVAC <input type="checkbox"/> Final <input type="checkbox"/> Rough Plumbing/test		Name _____ Date _____ Tel. _____ Cert No. _____

**RECEIPT:**    Check #: \_\_\_\_\_    From: \_\_\_\_\_    Rec'd by: \_\_\_\_\_    Date: \_\_\_\_\_