Rough Electrical

Rough Plumbing/test

From:_

Rough HVAC

TOTAL:

RECEIPT:

Check #:_

 \square Insulation

□Final

Telephone

Date:

Rec'd by: __

608-444-0372

Date: _

APPLICANT- ALL INSPECTIONS MUST BE PHONED IN TO 608-459-8800 JOHNSON INSPECTION LLC Permit No. UNIFORM APPLICATION **PO Box 127 BUILDING PERMIT** Arena, WI 53503 Wisconsin Statutes 101.63, 101.73 Project Description: Phone: 608-444-0372 The information you provide may be used by other government iohnsoninspection@gmail.com agency programs. [(Privacy Law, S. 15.04 (1)(m)] **PERMIT REQUESTED** □Construction □HVAC □Electric □Plumbing □Erosion Control □Other: Owner's Name: Mailing Address: Tel. Contractor Name & Type License# & Expiration **Mailing Address** Phone & Email Dwelling Contractor (Constr.) Dwelling Contr. Qualifier **HVAC Contractor: Electrical Contractor:** Plumbing Contractor: Lot area **PROJECT** One acre or more of Sa ft soil will be disturbed LOCATION 1/4, of Section E (or) W N.R Site Address: Subdivision Name: Lot No. Block No. Zoning Permit No. Zoning District(s) Setbacks: Front Rear Left Right ft. ft ft 6. ELECTRICAL 9. HVAC EQUIPMENT 12. ENERGY SOURCE 1. PROJECT **OCCUPANCY** □ New □ Single Family Entrance Panel ☐ Forced Air Furnace Fuel Nat Gas ΙP Flec Solid Solar ☐ Two Family Space Hta □ Alteration □ Repair Amps: ☐ Radiant Baseboard/Panel □ Addition □ Raze □ Commercial □ Underground ☐ Heat Pump Water Htg □ Overhead □ Garage □ Boiler □ Other: □ Move □ Other: □ Central Air Cond. 7. WALLS □ Fireplace 2. AREA INVOLVED 4. CONST. TYPE □ Wood Frame 13. HEAT LOSS □ Other ☐ Site-Built ☐ Timber/Pole _SqFt □ Mfd: □ WI Bsmt BTU/HR Total Calculated □ Steel 10. SEWER UDC Livina □ U.S. ☐ Other: ■ Municipal Envelope and Infiltration Losses ("Maximum Allowable Area _SqFt HUD ☐ Sanitary Permit No.: 5. STORIES Heating Equipment Output" on Energy Worksheet; Garage _____ _SqFt 8. USE □ 1-Story □ Seasonal "Total Building Heating Load" on RES check report) ___ Sq Ft Other_ □ Permanent 14. EST. BUILDING COST w/o LAND 11. WATER □ 2-Story □ Other: Total Sq Ft ☐ Other: □ Municipal Utility □ Plus Basement □ Private On-Site Well 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 CHP 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 youch 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 This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation APPROVAL CONDITIONS of this permit or other penalty. ☐ Town of State Contracted Inspection Municipality Number of Dwelling Location □ Village of □ County of Agency# ISSUING JURISDICTION **INSPECTIONS REQUIRED** WI PERMIT SEAL # **PERMIT ISSUED BY:** FEES: Footing □Underfloor Plumbing/test Tracy Johnson Name Foundation □OS Sewer Lateral/test Cert No. 664566 Rough Construction □ Flectric Service