



1810 CREST VIEW DRIVE #1C
 HUDSON, WI 54016
 OFFICE@ALLCROIX.COM
 715.377.2152

COMMERCIAL BUILDING PERMIT APPLICATION

Instructions: Print all information in ink. Completely fill out. Applications with missing information are considered incomplete and cannot be accepted. Please allow 10 business days for permit processing.

PROJECT/SITE LOCATION			
Street Address:			
City:	State:	Zip:	
Municipality:			
OWNER INFORMATION			
Name:			
Mailing Address:			
City:	State:	Zip:	
Phone 1:	Phone 2:		
Email:			
APPLICANT INFORMATION (IF DIFFERENT FROM OWNER)			
Name:			
Mailing Address:			
City:	State:	Zip:	
Phone 1:	Phone 2:		
Email:			
GENERAL CONTRACTOR INFORMATION			
Name:			
Street Address:			
City:	State:	Zip:	
Email:			
Phone 1:	Phone 2:		
Contractor Registration #: <i>(required)</i>			
DESIGN PROFESSIONAL INFORMATION			
Name:			
Street Address:			
City:	State:	Zip:	
Email:			
Phone 1:	Phone 2:		
State License #: <i>(required)</i>			
TYPE OF PERMIT REQUESTED		SIZE	
New Addition Alteration	<i>Check All that Apply</i> Construction Electrical HVAC Plumbing Erosion Control Other _____	New (Cubic FT) FT ³	Proposed Addition (SQ FT) FT ²
		Existing (SQ FT) FT ²	
	SETBACKS (FROM PROPERTY LINE)		
Front:	Rear:	Left:	Right:

BRIEF DESCRIPTION OF WORK
PROJECT COST
\$
APPLICANT'S STATEMENT
<p>I acknowledge that work under this permit is subject to inspection and shall cooperate with building inspector or an authorized agent to permit any such inspections during reasonable hours. Building Inspectors or their agents will have proper ID.</p> <p>I am the property owner of the above described property and certify that the information provided on this form is complete and accurate and hereby agree to comply with all applicable codes and ordinances of the municipality in which the project is located and the State of Wisconsin and any conditions attached hereto.</p>
_____ Property Owner Signature
_____ Date
<p>UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the applicable ordinances. I further certify that all easements, deed restrictions, or other encumbrances restricting the use of the property are shown on the site plans submitted with this application. I have been given authorization from the property owner to obtain this permit. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit herein applied for and approval of plans in connection therewith shall not be construed to permit any construction upon said premises or use thereof in violation of any applicable ordinance or to excuse the owner or his or her successors in title from complying therewith.</p>
_____ Applicant Signature
_____ Date



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RESIDENTIAL BUILDING PERMIT APPLICATION

Instructions: Print all information in ink. Completely fill out. Applications with missing information are considered incomplete and cannot be accepted. Please allow 10 business days for permit processing.

PROJECT LOCATION		BRIEF DESCRIPTION OF WORK							
Street Address:									
City:	State:					Zip:			
Municipality:									
OWNER INFORMATION									
Name:									
Mailing Address:									
City:	State:					Zip:			
Phone:	Phone 2:								
Email:									
CONTRACTOR INFORMATION									
Name :									
Street Address:									
City:	State:					Zip:			
Email:									
Phone:	Phone 2:	SETBACKS (REQ'D IF CHANGING FOOTPRINT)							
Dwelling Contractor License:	EXP:					Front:	Rear:	Left:	Right:
Contractor Qualifier License:	EXP:					COST OF PROJECT			
TYPE OF PERMIT REQUESTED		APPLICANT'S STATEMENT							
Check All That Apply EXAMPLE: Pole Shed with working lights <input checked="" type="checkbox"/> Construction <input checked="" type="checkbox"/> Electricity	Construction Electrical HVAC Plumbing Erosion Control Other _____	<p>I acknowledge that work under this permit is subject to inspection and shall cooperate with building inspector or an authorized agent to permit any such inspections during reasonable hours. Building Inspectors or their agents will have proper ID.</p> <p>I am the property owner of the above described property and certify that the information provided on this form is complete and accurate and hereby agree to comply with all applicable codes and ordinances of the municipality in which the project is located and the State of Wisconsin and any conditions attached hereto.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Property Owner Signature Date</p> <p>I am the contractor for the above described project and certify that I have entered into an agreement with the property owner to perform such work and that all information provided is accurate. I hereby agree to comply with all applicable codes and ordinances of the municipality in which the property is located and the state of Wisconsin and any conditions attached hereto.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Contractor Signature Date</p>							
PROJECT TYPE									
Addition _____SF	Deck _____SF								
Alteration _____SF	Electrical Service Upgrade								
Accessory Building	Attached Garage								
(Choose One:)	New Foundation under Existing Structure								
Detached Garage _____SF	Fireplace (Type) _____								
Pole Shed _____SF	Re-Roof								
Garden/Utility Shed _____SF	Re- Side								
Basement Finish	Pool (Check One:)								
(Check All that Apply)	Above In-Ground								
Bathroom	Windows/Doors (Check All that Apply)								
Bedroom	Same size, # _____								
Living Room	Enlarge, # _____								
Kitchen	Decrease, # _____								
Other _____	Other _____								



Cautionary Statement to Owners Obtaining Building Permits

101.65(lr) 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

Contractor Lead CERT LIC #: _____

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

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

Owner's Signature: _____ Date: _____

Project Location: _____



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SUBCONTRACTOR LIST

Instructions: Print all information in ink.

OWNER/PROJECT INFORMATION
Owner Name:
Project Location:

ELECTRICAL CONTRACTOR			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2 :		
Email:			
Electrical Contractor LIC # :			EXP:
Master Electrician LIC #:			EXP:

HVAC CONTRACTOR			
Business Name :			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Email:			
Phone:	Phone2:		
HVAC LIC #			EXP:

PLUMBER			
Business Name :			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Email:			
Phone:	Phone2:		
Master Plumber LIC #			EXP:

EXCAVATOR			
Business Name :			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Email:			
Phone:	Phone2:		

MASONRY CONTRACTORS			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2:		
Email:			

INSULATION CONTRACTORS			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2:		
Email:			

ROOFING CONTRACTOR			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2:		
Email:			

SIDING CONTRACTOR			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2:		
Email:			

OTHER			
Business Name:			
Contact Name:			
Street Address:			
City:	State:	Zip:	
Phone:	Phone2:		
Email:			