Inspection Specialists LLC P.O. Box 22 Brussels, WI 54204

WISCONSIN UNIFORM BUILDING PERMIT APPLICATION

PERMIT	NO.

PARCEL NO.

(920) 495 3232			APPLI	CAI	IUN								
ISSUING	OF	☐ TOWN ☐ VILLAGE ☐ CITY			PROJECT LOCATION (Building Address)					all and a second			
MUNICIPALITY	OF			PROJECT DESCRIPTION									
Owner's Name			Mailing Address						Tel				
Dwelling Contractor Qualifier			Lic/Cert#	Mailing Address					Tel				
Construction Contractor			Lic/Cert#	N	Mailing Address				Tel				
Plumbing Contractor			Lic/Cert#	N	Mailing Address				Tel				
Electrical Contractor			Lic/Cert#	N	Mailing Address				Tel				
HVAC Contractor		Lic/Čert#	N	Mailing Address			Tel						
1. PROJECT	3. OCCUPANO	CY I	6. ELECTRICAL	9. F	IVAC EQUIPMENT	12. ENERG	Y SOURC	Œ					
□ New □ Repair	☐ Single Famil		Entrance Panel		orced Air Furnace	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar	
☐ Alteration ☐ Raze	☐ Two Family		Amps:		adiant Basebd/ Panel	Space Htg							
☐ Addition ☐ Move	□ Garage		□ Underground	1000000	leat Pump	Water Htg							
☐ Other:	□ Other:		☐ Overhead	250,730,780	Boiler	☐ Dwelling					ectric sp	ace	
Source.	L Outer.	1	7. FOUNDATION		Central Air Cond.	heating equi			and the total of the base				
2. AREA INVOLVED 4. CONST. TYPE		□ Concrete		Other: 13. HEAT LOSS									
	☐ Site-Built		□ Masonry							-	-		
Bsmtsq.ft.		LIDC		10	SEWER				RT	II/HR T	otal Calo	ulated	
Living '	□ Mfd: □ WI	UDC	☐ Treated Wood	10.	JE WER								
Areasq.ft	□ U.S	. HUD	□ Other:		Municipal	Envelope and Infiltration Losse				aximum	Allowal	ole	
Garagesq.ft.	5. STORIES		8. USE		Sanitary Permit No.:	Heating Equipment Output" on E "Total Building Heating Load" or							
Deckssq.ft.	☐ 1-Story		☐ Seasonal	H - '									
Petrophysical Company of the Company			☐ Permanent	11	WATER								
Othersq.ft.	☐ 2-Story ☐ Other:		☐ Other:		Municipal Utility	14. EST. BUILDING COS		J-001		-			
Totalsq.ft	☐ Plus Baseme	ent	L Outer.	OF	Private On-Site Well	\$							
I agree to comply with all appl or implied, on the state, munic construction permit, I have rea permission to enter the premiss be disturbed, I understand that APPLICANT'S SIC PRINT NAME	ipality, inspection d the cautionary ses for which this p this project is sub	agency or ins tatement regar permit is sough pject to ch. NR	pector; and certify that rding contractor financi ht at all reasonable hou 151 regarding addition	all the a ial respo irs and fo nal erosi	above information is accu- nsibility. I expressly gra- or any proper purpose to it on control and stormwate	rate. If I am an int the building interpreted the worker management.	owner appl nspector, or that is bein	ying for the insp ig done.	an eros pector's If one a	authorize	rol or ed agent, ore of so	il will	
WI Seal No.					Municipality I	No.							
FEES:	1	PERMIT	r number		RECEIPT	PERMIT IS	SUED BY	:					
		I LIMITI											
Electric \$_		Elec #		CK#									
		EICC. #				Name							
Hvac \$_				Amou	nt \$	1102110							
	\$ Plmb. # A		camoul	Amount \$									
Zoning \$_				Date		Date	р	hone					
C 0 Water				Date_			, .					1000000	
Other \$		HVAC #											
Total	From			Cert No									