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|---------------------------|--|------------------|
| Est. Cost w/ Labor: _____ | VILLAGE OF MARQUETTE PERMIT APPLICATION | PERMIT NO. _____ |
|---------------------------|--|------------------|

| | | | | |
|---|-----------------|-----------|-----------------|-----------------------|
| PERMIT REQUESTED: <input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion <input type="checkbox"/> Other | | | | |
| Owner's Name | Mailing Address | | | Telephone No. & Email |
| Contractor Name | Lic/Cert No. | Exp. Date | Mailing Address | Telephone No. & Email |
| Dwelling Contr. Qualifier | Lic/Cert No. | Exp. Date | Mailing Address | Telephone No. & Email |
| HVAC Contractor | Lic/Cert No. | Exp. Date | Mailing Address | Telephone No. & Email |
| Electrical Contractor | Lic/Cert No. | Exp. Date | Mailing Address | Telephone No. & Email |
| Plumbing Contractor | Lic/Cert No. | Exp. Date | Mailing Address | Telephone No. & Email |

PROJECT ADDRESS/LOCATION: _____ **Parcel #** _____

LAND USE PERMIT NO. _____ **SETBACKS** _____ **Front** _____ **Rear** _____ **Left** _____ **Right** _____

DESCRIPTION OF WORK: _____

WORK CONSISTS OF:

| | | | |
|--------------------------------------|--------------------------------------|--|---|
| <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> NEW | <input type="checkbox"/> ADDITION | <input type="checkbox"/> REMODEL/ALTERATION |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> NEW | <input type="checkbox"/> ADDITION | <input type="checkbox"/> REMODEL/ALTERATION |
| <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> ACCESSORY | <input type="checkbox"/> FOOTING & FOUNDATION ONLY | |
| <input type="checkbox"/> SIGN | <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> SERVICE _____ | AMPS _____ VOLTS |

BUILDING USE: _____

FOUNDATION: _____ **ROOF:** _____ **SIDING:** _____

TYPE OF CONSTRUCTION: _____

SIZE: _____ **FEET WIDE** X _____ **FEET LONG** _____ **FEET ABOVE GRADE**

_____ **SQUARE FEET** _____ **HEIGHT** _____ **STORIES ABOVE GRADE**

| | |
|---|--|
| FEES: Plan Review _____ Inspection _____ Bond _____ Other _____ Total Fees _____ | Applicant Signature _____ Date: _____ Permit Issued By: _____ Cert. No: _____ Date: _____ |
| Permission is hereby granted for the above described work on condition that same be done in accordance with the application, plan and specification on file and in compliance with the building ordinance and other ordinances of the municipality named above. All work (footing, foundation, backfill, structural, insulation, plumbing, HVAC, electrical and final inspections) be reported when ready for inspection as required by the Building Inspector. | |