

Inspections: <b>(262) 366-2400</b>	<h2 style="margin: 0;">Town of Troy Building Permit Application</h2> <p style="margin: 0;">N8870 Briggs Street East Troy, Wisconsin 53120</p>	Permit No. _____ Parcel No. _____
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Owner's Name _____	Mailing Address _____	Tel. _____
Contractor's Name <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg	Lic _____ Mailing Address _____ Q# _____	Tel. _____ Fax# _____
Contractor's Name <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg	Lic/Cert# _____ Mailing Address _____	Tel. _____ Fax# _____
Contractor's Name <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg	Lic/Cert# _____ Mailing Address _____	Tel. _____ Fax# _____
Contractor's Name <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg	Lic/Cert# _____ Mailing Address _____	Tel. _____ Fax# _____

Building Address: \_\_\_\_\_ Project Description: \_\_\_\_\_  
 Zoning District \_\_\_\_\_ Bldg: HGT \_\_\_\_\_ Zoning Permit # \_\_\_\_\_ Setbacks: Front \_\_\_\_\_ ft. Rear \_\_\_\_\_ ft. Left \_\_\_\_\_ ft. Right \_\_\_\_\_ ft.

Inspector Signature \_\_\_\_\_ Phone **262-366-2400** for all inspections.

Permit Fees — No Refunds on Permits	Quantity	Fee
<b>Residential - 1 and 2 Family</b>		
Remodel/Additions		
-Remodel \$.11 / sq. ft. - \$100.00 min. • Additions \$.15 per sq. ft. - \$250.00 min ..... -Kitchen Remodel - \$100 • Bath Remodel - \$75 .....		
Accessory Building		
- \$.20 / sq. ft. - \$65.00 min. • Agricultural Building \$.07 / sq. ft. - \$100.00 min ..... Decks / each - \$120.00 .....		
Pools		
- Above Ground \$100.00 / Inground \$120.00 .....		
<b>COMMERCIAL - RESIDENTIAL • AGRICULTURAL</b>		
Comm. New Const.		
- Permit fees \$.17 / sq. ft., all areas / \$75 Plan Review (\$400.00 minimum)..... Remodel/Additions - Remodel \$.17 / sq. ft. • \$200.00 min. • Additions \$.17 / sq. ft. • \$300.00 min..... Demo - \$75.00 • Occ. \$60.00 .....		
Modular Dwelling		
- \$700.00 .....		
Other		
Cell Tower \$120.00 • Res. Window Replacement \$65.00.....		
<b>Permit to start construction of footings &amp; foundation</b>		
<input type="checkbox"/> Residential - \$50.00 <input type="checkbox"/> Commercial-industrial - \$75.00 <input type="checkbox"/> Re-inspection fee \$40.00.....		

Double fees shall be charged if work is started before permit is issued.

Valuation: \$ \_\_\_\_\_ Ck# \_\_\_\_\_ Rec'd by \_\_\_\_\_ Date Rec'd \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Total Fees: \$ \_\_\_\_\_

I agree to comply with 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. If I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side of the last ply. 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 of this form.

**Applicant (Print):** \_\_\_\_\_ **Sign:** \_\_\_\_\_ **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.

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