

<b>Town of Barton</b> 3482 Town Hall Road Kewaskum, WI 53040 Phone: (262)334-2765	<b>Building Permit Application</b> Permit #- _____ Tax Key- _____
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Owner's Name	Mailing Address, City, State, Zip Code
Project address	Owner's phone #, include area code
Contractor's name	Contractor's Mailing address, city, state, zip code
Contractor's Dwelling Contractor (DC) #:	Phone #, include area code Fax #
Dwelling Contractor Qualifier (DCQ) #:	

### Type of project

- |  |   |
|--|---|
| <input type="checkbox"/> New one and two-family residence          | <input type="checkbox"/> HVAC (Add or replace AC, replace furnace etc.)                           |
| <input type="checkbox"/> Commercial/industrial/multi-family        | <input type="checkbox"/> Alteration (Reroof, siding, windows, interior remodel, finish basements) |
| <input type="checkbox"/> Accessory buildings (120 Sq. ft. or over) |   |
| <input type="checkbox"/> Additions                                 |   |
| <input type="checkbox"/> Deck, Pool, Fence                         | <input type="checkbox"/> Other  |

<b><u>Project Description:</u></b>
<b><u>Used for:</u></b>
<b><u>Estimated Cost:</u></b>
<b><u>Needed with Application</u></b>

- |   |  |
|---|--|
| <input type="radio"/> Wash. Co. Planning and Parks Dept. sign off sheet-if in area beyond 1000 ft. of body of water/wetlands or Wash. Co. Shoreland zoning permit if within 1000 ft. of body of water/wetland (These are not needed for Alterations, or HVAC) | <input type="radio"/> 2 sets of building plans (3 sets if you want copy returned)<br><input type="radio"/> 2 copies of survey or site plan- showing location of proposed structure (can be sketched on survey/site plan) (3 sets if you want copy returned)<br>(These are not needed for Alterations, or HVAC) |
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<b><u>Signature of Applicant:</u></b>	<b><u>Date:</u></b>
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The applicant agrees to comply with the Municipal Ordinances, State of WI Building Codes, and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, of the Department, Municipality, Agency or Inspector; and certifies that all of the above information is accurate.

<b>To request an inspection: call the Building Inspector at number listed. Please give project address, permit # if possible, and type of inspection. Please give at least 24 hour notice on all inspections. 48 hour notice on footing inspections if possible.</b> <b><u>*Drop off completed application at Town Hall or contact Building Inspector</u></b>	<b>Certified Building Inspector</b> <b>Jeremy Pfeifer</b> <b>Office: 262-629-1774</b> <b>Cell: 262-689-7346</b> <b>License #: 1293974</b> <b>Email: jeremy@jpbuidinginspections.com</b>
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Accepted by \_\_\_\_\_ Date \_\_\_\_\_ Paid \_\_\_\_\_

<u>Office use only</u>			
Basement SF-	Garage SF-	HVAC-	Plan Review-
Living space SF-	Decks/Porch SF-	Erosion-	Inspection-
Commercial SF-		Zoning-	Occupancy-
		Other-	WI Seal-
			<b>TOTAL-</b>

Issued: \_\_\_\_ / \_\_\_\_ /20\_\_\_\_