



Application for Appearance before the Architectural Review Committee

Owner's Name	Contractor's Name
Property Address	Address
Telephone	Telephone
Email	Email

Proposed project details (type of work, size, materials, etc.):

Project Proposal

Date _____

Property Address _____

Zoning _____

- | | |
|---|--|
| <input type="checkbox"/> Accessory Structures/Generators
<input type="checkbox"/> Additions/Remodel
<input type="checkbox"/> Bluff Management
<input type="checkbox"/> Commercial Signage
<input type="checkbox"/> Decks/Patios
<input type="checkbox"/> Fence
<input type="checkbox"/> Fire Pits
<input type="checkbox"/> Landscaping requiring Impervious Surface/Fill/Excavation Permit | <input type="checkbox"/> New Construction
<input type="checkbox"/> Play Structures
<input type="checkbox"/> Recreational Facilities/Courts
<input type="checkbox"/> Roofs
<input type="checkbox"/> Solar Panels/Skylights
<input type="checkbox"/> Swimming Pools
<input type="checkbox"/> Windows/Doors-change exceeds 25% of opening
<input type="checkbox"/> Other |
|---|--|

Proposed project details (type of work, size, materials, etc.):

******* For Office Use Only *******

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	Color photographs showing project location, elevations and surrounding views
<input type="checkbox"/>	<input type="checkbox"/>	Two (2) complete digital sets of building plans (including elevations and grading)
<input type="checkbox"/>	<input type="checkbox"/>	Survey
<input type="checkbox"/>	<input type="checkbox"/>	Samples or brochures showing materials, colors and designs
<input type="checkbox"/>	<input type="checkbox"/>	Application Fee
<input type="checkbox"/>	<input type="checkbox"/>	Parcel Number:
<input type="checkbox"/>	<input type="checkbox"/>	ARC Agenda Date:
<input type="checkbox"/>	<input type="checkbox"/>	Building Permit
<input type="checkbox"/>	<input type="checkbox"/>	Fill Permit
<input type="checkbox"/>	<input type="checkbox"/>	Impervious Surface Permit
<input type="checkbox"/>	<input type="checkbox"/>	Plan Commission/Conditional Use Permit
<input type="checkbox"/>	<input type="checkbox"/>	Tax Key Number
<input type="checkbox"/>	<input type="checkbox"/>	Right-of-Way/Excavation Permit
<input type="checkbox"/>	<input type="checkbox"/>	Variance Required



PERMIT NO.
_____ - _____

Building Permit Application

Village of Bayside

9075 N Regent Road

414-206-3915

Hartfordinspections@safebuilt.com

262-346-4577

One & Two Family Commercial

Fee Totals	
Building Fee	
Electrical Fee	
Plumbing Fee	
HVAC Fee	
Total	

Owner Information

Project Address: _____	Description of Project:
Owner Name: _____	
Owner Address: _____	
Owner Phone: _____	
Owner Email (required): _____	Estimated Cost: \$

Contractor Information

Check Here if **Homeowner** is the Contractor YES, the homeowner is the contractor

Construction Contractor: _____	Contractor Lic No _____
Dwelling Contractor: _____	DQC Lic No _____
Company Address: _____	City/State/Zip: _____
Contractor Phone: _____	
Contractor Email (required): _____	

Project Information

Project	Area	Stories	Foundation
<input type="checkbox"/> New	Basement Sq. Ft.	<input type="checkbox"/> 1-story	<input type="checkbox"/> Concrete
<input type="checkbox"/> Alternation	Living Area Sq. Ft.	<input type="checkbox"/> 2-story	<input type="checkbox"/> Masonry
<input type="checkbox"/> Addition	Garage Sq. Ft.	<input type="checkbox"/> Other	<input type="checkbox"/> Treated Wood
<input type="checkbox"/> Repair	Other Sq. Ft.	Type	<input type="checkbox"/> ICF
<input type="checkbox"/> Raze	Total Sq. Ft.		<input type="checkbox"/> Other
<input type="checkbox"/> Move	Construction Type	<input type="checkbox"/> Single Family	Dumpster Required
<input type="checkbox"/> Other:		<input type="checkbox"/> Two Family	
Garage		<input type="checkbox"/> Multi	
<input type="checkbox"/> Attached	<input type="checkbox"/> Site Constructed	<input type="checkbox"/> Commercial	<input type="checkbox"/> Yes
<input type="checkbox"/> Detached	<input type="checkbox"/> Mfd. UDC		<input type="checkbox"/> No
	<input type="checkbox"/> Mfd. HUD		

Conditions of Approval

I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the Notice to Permit Applicants form; am subject to any conditions of this permit; understand that the issuance of this 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 and the owner shall sign the statement on the Notice to Permit Applicants form. 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 Notice to Permit Applicants form.

Applicant (Print): _____

Signature: _____

Date: _____

Receipt INFO (OFFICE USE)	
Amount	
Date	
Rec. By	

2022 Architectural Review Committee (ARC) Meeting Information

- Meeting date - 6pm
- Deadline for submission of application at 10am

ITEMS WHICH REQUIRE COMMITTEE APPROVAL:

Please visit us online at www.baysidewi.gov/documents/architecture-review-committee-requirements/ for more information.

INFORMATION REQUIRED TO APPLY:

Please visit us online at www.baysidewi.gov/documents/architecture-review-committee-requirements/ for more information.

A filing and building permit fee are due when the ARC application is submitted. *Permit and filing fees are non-refundable.*
Please be aware, members of the ARC may visit the project site prior to the meeting.
Building permits may be issued on the Friday following the meeting.

- [ARC Packet](#)
- [Fee Schedule](#)
- [Municipal Code](#)



MEETINGS AND DEADLINES • 2022

JANUARY 2022				
MON	TUE	WED	THU	FRI
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31				
14-Feb				

FEBRUARY				
MON	TUE	WED	THU	FRI
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28				
14-Mar				

MARCH				
MON	TUE	WED	THU	FRI
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30	31	
4-Apr				

APRIL				
MON	TUE	WED	THU	FRI
				1
4	5	6	7	8
11	12	13	14	15
18	19	20	21	22
25	26	27	28	29
18-Apr				
2-May				

MAY				
MON	TUE	WED	THU	FRI
2	3	4	5	6
9	10	11	12	13
16	17	18	19	20
23	24	25	26	27
30	31			
16-May				
6-Jun				

JUNE				
MON	TUE	WED	THU	FRI
		1	2	3
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29	30	
20-Jun				

JULY				
MON	TUE	WED	THU	FRI
				1
4	5	6	7	8
11	12	13	14	15
18	19	20	21	22
25	26	27	28	29
1-Aug				

AUGUST				
MON	TUE	WED	THU	FRI
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31		
15-Aug				
12-Sep				

SEPTEMBER				
MON	TUE	WED	THU	FRI
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30
12-Sep				

OCTOBER				
MON	TUE	WED	THU	FRI
3	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31				
24-Oct				
14-Nov				

NOVEMBER				
MON	TUE	WED	THU	FRI
	1	2	3	4
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30		
12-Dec				

DECEMBER				
MON	TUE	WED	THU	FRI
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23
26	27	28	29	30
16-Jan				