

APPLICATION FOR BUILDING PERMIT

Key # _____
Permit # _____
Date Issued _____

BUILDING

New Construction

Remodel/Repair Other

- | | |
|---|--|
| <input type="checkbox"/> 1 Family Dwelling | <input type="checkbox"/> Repair Foundation |
| <input type="checkbox"/> 2 Family Dwelling | <input type="checkbox"/> Res. Addition |
| <input type="checkbox"/> Apartment (3+) | <input type="checkbox"/> Res. Alteration |
| <input type="checkbox"/> Condominium (3+) | <input type="checkbox"/> Fire Damage Repair |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Razing |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Interior Demolition |
| <input type="checkbox"/> Tower/Antenna | <input type="checkbox"/> Tenant Finish |
| <input type="checkbox"/> Footing/Foundation | <input type="checkbox"/> Commercial Alt. |
| <input type="checkbox"/> Other | <input type="checkbox"/> Commercial Addn. |
| | <input type="checkbox"/> Moving |
| | <input type="checkbox"/> Other |

Remarks:

Please Fill in all Spaces - Thank You!

PROJECT ADDRESS

Job Valuation: \$ _____

Occupant _____

Owner: _____

Owner's Address if different: _____

City, State, Zip: _____

Owner's Phone Home _____

Owner's Phone Work: _____

WI Dwelling Cert# & Qualifier# _____

Contractor/Applicant: _____

Contr./Appl's Address: _____

City, State, Zip: _____

Contr./Appl's Phone: _____

Architect's Name: _____

Architect's Phone: _____

Construction Type: _____

Applicant Email: _____

Applicant, please note:

The applicant agrees to comply with all applicable codes, statutes and ordinances of the City of Cudahy. The issuance of the permit creates no legal liability, express or implied, on the Department or municipality. All information provided above is accurate.

APPLICANT'S SIGNATURE

Date

Please Print Name _____

BUILDING PERMIT FEE CALCULATION

Plan Examination _____
 \$ _____ @ _____ per Thou. _____
 or _____ Sq.Ft. @ _____
 Minimum Fee/Building _____
 State Seal _____
 Erosion Control _____
 HVAC (New Homes) _____
 Processing Fee \$15.00 _____
 Total _____

Reviewed by: _____

OCCUPANCY

Occ # _____
Permit Fee _____