



1810 CREST VIEW DRIVE #1C
 HUDSON, WI 54016
 OFFICE@ALLCROIX.COM
 715.377.2152

RESIDENTIAL ADDITION BUILDING PERMIT APPLICATION

Instructions: Print all information in ink. Completely fill out. Applications with missing information are considered incomplete and cannot be accepted. Please allow 10 business days for permit processing.

PROJECT LOCATION				BRIEF DESCRIPTION OF WORK			
Street Address:							
City:		State:	Zip:				
Municipality:							
OWNER INFORMATION							
Name:							
Mailing Address:							
City:		State:	Zip:				
Phone:		Phone 2:					
Email:							
CONTRACTOR INFORMATION							
Company:		Contact:					
Street Address:							
City:		State:	Zip:				
Email:							
Phone:		Phone 2:					
Dwelling Contractor License:			EXP:				
Contractor Qualifier License:			EXP:				
TYPE OF PERMIT REQUESTED							
Check All That Apply EXAMPLE: Pole Shed with working lights <input checked="" type="checkbox"/> Construction <input checked="" type="checkbox"/> Electricity		Construction Electrical HVAC Plumbing Erosion Control Other _____					
PROJECT TYPE							
Addition _____SF <i>(Check All that Apply)</i> Attached Garage Bathroom _____SF Bedroom Living Room Kitchen Other _____ Deck _____SF		Accessory Building <i>(Choose One:)</i> Detached Garage Pole Shed _____SF Garden/Utility Shed _____SF New Foundation under existing structure Other _____					
SETBACKS (Required)							
FRONT of property is where driveway meets road, Actual distance from structure to lot lines or road							
Front:	ft	from the	CENTERLINE PROPERTY LINE				
Rear:	ft	from the	CENTERLINE PROPERTY LINE				
Left:	ft	from the	CENTERLINE PROPERTY LINE				
Right:	ft	from the	CENTERLINE PROPERTY LINE				
COST OF PROJECT							
\$							
APPLICANT'S STATEMENT							
<p>Check ONE:</p> <p>I am the property owner/occupant of the above described property and certify that the information provided on this form is complete and accurate and hereby agree to comply with all applicable codes and ordinances of the municipality in which the project is located and the State of Wisconsin and any conditions attached hereto. I acknowledge that work under this permit is subject to inspection and shall cooperate with building inspector or an authorized agent to permit any such inspections during reasonable hours. I acknowledge that I am responsible for ensuring compliance with State and municipal codes.</p> <p>I am the properly credentialed WI Contractor for the above described project and certify that I have entered into an agreement with the property owner to perform such work and that all information provided is accurate. I hereby agree to comply with all applicable codes and ordinances of the municipality in which the property is located and the state of Wisconsin and any conditions attached hereto. I acknowledge that work under this permit is subject to inspection and shall cooperate with building inspector or an authorized agent to permit any such inspections during reasonable hours.</p>							
_____ Applicant's Signature			_____ Date				
_____ Print Name							