

# BUILDING PERMIT APPLICATION: **COMMERCIAL BUILDING**

City of Altoona, Wisconsin

The information you provide may be used by other government agency programs [Privacy Law, s. 15.04 (1)(m)]. The *Wisconsin Commercial Building Code* is available @ [www.legis.state.wi.us/rsb](http://www.legis.state.wi.us/rsb). Information is also available at the Department of Commerce @ [www.commerce.state.wi.us](http://www.commerce.state.wi.us), click on Division of Safety & Buildings.

<b>THE OWNER'S NAME MUST BE THE NAME THAT APPEARS ON THE TAX ROLL. You may call 715-839-6092 to verify. If the current owner is not correctly identified, the application must be re-submitted, which will delay the start of the project.</b>						Building/Project Address					
Owner's Name:											
Owner's Mailing Address:											
Telephone:			Cell:		18-201-		Parcel #				
Permit(s) Requested:		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing				Erosion Control Permit #					
Construction Contractor's Name		Project Contact Name:		Est. Value of Project		Construction Permit #					
		Mailing Address		Tele:		(assigned by Bldg Insp)					
Lic Cert #				Cell:							
				Fax:							
HVAC Contractor's Name		Project Contact Name:		Est. Value of Project		HVAC Permit #					
		Mailing Address		Tele:		(assigned by Bldg Insp)					
Lic Cert #				Cell:							
				Fax:							
Electric Contractor's Name		Project Contact Name:		Est. Value of Project		Electric Permit #					
		Mailing Address		Tele:		(assigned by Bldg Insp)					
Lic Cert #				Cell:							
				Fax:							
Plumbing Contractor's Name		Project Contact Name:		Est. Value of Project		Plumbing Permit #					
		Mailing Address		Tele:		(assigned by Bldg Insp)					
Lic Cert #				Cell:							
				Fax:							
Project Location			1/4	1/4	Section		T	R			
							27N	9W			
Zoning District(s):		Subdivision Name:			Lot #:		Block #:				
SETBACKS:		Front		Rear		Left		Right			
PROJECT DESCRIPTION: please use this space to describe your project.											
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 I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility. 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. The owner is responsible to meet all provisions of the <i>Wisconsin Commercial Building Code</i> .											
APPLICANT'S SIGNATURE						DATE SIGNED					
<b>Approval Conditions:</b> This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.											
I have read and will abide by the above approval conditions.						Initials:		Date:			
FEES			WIS Permit Seal No.			Permit Issued By:					
			Receipt			Name: Eric Velin					
Construction (44310)		\$	Cash Ck						Date:		
HVAC (44330)		\$									
Electrical (44320)		\$									
Plumbing (44340)		\$									
Erosion (44310)		\$									
WI Permit Seal (44310)		\$									
TOTAL		\$ 0.00	From			Cert. No. 70304					
			Rec. By								