

Residential Permit Application
Additions- Remodels- General Repairs

Building ☐

Electrical ☐

Plumbing ☐

HVAC ☐

Village of Stockbridge Land Use Permit #	
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Permit #	
Date	

Owner _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Parcel # _____ Zoning _____

Contractor Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

License # _____ Contact Person _____

Project Description

Description of Project _____ Cost \$ _____

Sq. Ft of Project _____

Project Type

All items listed below with * REQUIRE PRIOR APPROVAL !! A Land Use Permit Application for zoning MUST be completed before Building Permits are obtained!!

(All Inclusive) - consists of Footing, Foundation, Construction, Electrical, Plumbing, HVAC, Insulation, and Final Inspections

Additions - (All Inclusive) *	\$	350.00	
Remodel - (All Inclusive) *	\$	250.00	
Attached Garage - (All Inclusive) *	\$	250.00	
Unattached Structure w/Electric *	\$	150.00	
Unattached Structure - No Electrical *	\$	50.00	
Boat House w/ Electric *	\$	150.00	
Boat House - No Mechanicals *	\$	50.00	
Deck - (All Inclusive) *	\$	200.00	
Fence *	\$	60.00	
Permanent Pool - (All Inclusive) *	\$	200.00	
Electrical: Service (Overhead / Underground)	\$	100.00	
General Wiring	\$	100.00	
Plumbing - General Connections	\$	100.00	
HVAC : Furnace/ A-C Change	\$	60.00	
Siding / Doors / Windows / Roof	\$	50.00	
Basement Remodel - (All Inclusive)	\$	150.00	
Foundation Repair	\$	60.00	
Wrecking Permit / Removal of Structure	\$	50.00	
Misc. Permit/ General Repair - Over \$1,000	\$	60.00	
Total Amount Due			

Make Check Payable to:

Village of Stockbridge

Return Application and Check to:

Village of Stockbridge
PO Box 292
Stockbridge, WI 53088

For Inspections Call:

Witkowski Inspection Agency, LLC
Brian Witkowski
Cell: 920-912-0832

Inspections Required

☐ Footing

☐ Electrical Service

☐ Erosion Control

☐ Insulation

☐ Foundation

☐ U-G Plumbing

☐ Rough-In**

☐ Final

**Rough-In Includes: Construction; Electrical; Plumbing; HVAC

Applicant is responsible for calling and scheduling all inspections to close out the permit once work is complete!

Address _____ Permit # _____

Complete Page 2 ONLY if Applying for: Electrical - Plumbing - HVAC Permit

Electrical Permit: Company _____ Phone # _____

New Service ☐ OH ☐ UG
Service Change ☐ OH ☐ UG ☐ OH to UG
All Services Volts/ Amps _____
Number of Meters _____
Service Utility _____
Phase _____
Location of Service _____
Outbuilding _____
Alternative Energy Installation _____

Signature of
Licensed Electrician _____ License # _____

Plumbing Permit: Company _____ Phone # _____

<input type="checkbox"/> Floor Drains	<input type="checkbox"/> Sump Pump	<input type="checkbox"/> Lav's
<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Hose Bibs	<input type="checkbox"/> Water Closets
<input type="checkbox"/> Showers	<input type="checkbox"/> Water Softener	<input type="checkbox"/> Laundry Box
<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> Sinks	<input type="checkbox"/> Other : _____
<input type="checkbox"/> Bar Connection	<input type="checkbox"/> Bath Tub	<input type="checkbox"/> Other : _____

ALL TESTS ON ROUGH INSTALLATIONS AS PER WIS. PLUMBING CODE. ALL INFORMATION ON THIS PERMIT IS PURSUANT TO THE WISCONSIN STATUTE 145.06(1)(A), STATING THAT PLUMBING WORK MUST BE PERFORMED BY A CONTRACTING MASTER PLUMBER. The applicant agrees to comply with the Wisconsin Uniform Dwelling Code and other Municipal Ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, expressed or implied on the Department or Municipality, certifies that all the information is accurate. I the undersigned hereby applies for a permit for the execution and of installation of Plumbing as herein described.

Signature of
Master Plumber _____ License # _____

HVAC Permit Company _____ Phone # _____

<input type="checkbox"/> New Furnace	<input type="checkbox"/> Fireplace or Wood Burner
<input type="checkbox"/> New Boiler	<input type="checkbox"/> Replacement of Equipment
<input type="checkbox"/> Unit Heater(s) _____	<input type="checkbox"/> Air Conditioning _____
<input type="checkbox"/> Roof Top Unit(s) _____	<input type="checkbox"/> Ventilation _____
<input type="checkbox"/> Addition to existing system	<input type="checkbox"/> Other _____

Description of Work _____

Type of Fuel _____

Calculated BTU Heat Loss _____

Size of Unit (BTU Rating) _____ Output _____ Input _____

The undersigned certifies that all of the above information is correct, and applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions set forth herein; and it is further agreed that such work will be done in strict compliance with the Wisconsin Heating/ Cooling/ Ventilation Code as in SPS 322.01 & 323.01

Signature of
HVAC Contractor _____ License # _____

Address _____ Permit # _____

Cautionary Statement:

101.65(1r) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that if the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under sub. 101.654 (2)(a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one and two family dwelling code or an ordinance enacted under sub. (1)(a), because of any bodily injury to, death of others, or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to, death of others, or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

If this project is in a dwelling, or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirement of ch. DSPS 163 requiring Lead-Safe Renovations Training and Certifications apply. Call (608) 261-6876 or go to the WI Dept of Health Services lead homepage for details of how to be in compliance. ATCP 110 for consumer protection and Lien Waiver Law's.

You are hereby advised that the owner, as defined in 101.01 (2) (e) of Wisconsin State Statutes is responsible for all code requirements not specifically cited herein.

The Applicant (Property Owner or Contractor) agrees to comply with the Wisconsin Uniform Dwelling Code, Wisconsin Enrolled Commercial Building Code, and all other applicable codes and municipal ordinances and with the conditions of the permit. The Applicant understands that the issuance of the permit creates no legal liability, express or implied, on the Inspection Agency or the municipality and certifies that the information is accurate.

The Applicant agrees to allow the building inspection and assessing to access the property for the inspection of this permit.

Applicant is responsible for calling and scheduling all inspections to close out the permit once work is complete!

It is the Applicant's responsibility to know where the lot lines are located!

I, hereby certify that I have read the Cautionary Statement and understand and agree to abide by the following special regulations and provisions of this permit application, all applicable provisions and restriction, which are shown on this application.

Applicant Signature : _____
(Property Owner or Contractor)

Date : _____

For Office Use Only

Date Application Received: _____ Paid \$ _____ Check # _____ Cash ☐

Approved by: _____ Date: _____

Conditions of Approval:
(If Applicable) _____

Permit Denied by: _____ Date: _____

Reason for Denial: _____