

Village of McFarland Community Development Department 5915 Milwaukee Street, P.O. Box 110 McFarland, WI 53558-0110		VILLAGE OF MCFARLAND PERMIT APPLICATION (complete areas highlighted in yellow) (read and sign front and reverse)				Permit No. _____ Parcel No. _____																						
PERMIT REQUESTED		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion <input type="checkbox"/> Occupancy																										
Owner's Name		Mailing Address			Tel.																							
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Mailing Address		Tel.																							
					FAX																							
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Mailing Address		Tel.																							
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					FAX																							
PROJECT LOCATION		Lot area _____ Sq. ft.		_____ of Section _____, T _____ N, R _____ E (or) W																								
Building Address		Subdivision Name			Lot No.	Block No.																						
Zoning District(s)	Set-backs:	Front ft.	Rear ft.	Left ft.	Right ft.	COMMERCIAL - Fire Protection System Work Permit App. Date: _____ <input type="checkbox"/> Orig to applicant <input type="checkbox"/> Copy to Fire Dept.																						
Project Description:																												
1. PROJECT		3. OCCUPANCY		6. ELECTRICAL		9. HVAC EQUIPMENT																						
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move Occupancy <input type="checkbox"/> New Bldg or <input type="checkbox"/> Change of Use		<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Other:		Entrance Panel Amps: <input type="checkbox"/> Underground <input type="checkbox"/> Overhead		<input type="checkbox"/> Forced Air Furnace <input type="checkbox"/> Radiant Baseboard/Panel <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central Air Conditioning <input type="checkbox"/> Other:																						
2. AREA INVOLVED		4. CONST. TYPE		7. FOUNDATION		12. ENERGY SOURCE																						
Unfin. _____ Sq Ft Bsmt _____ Sq Ft Living Area _____ Sq Ft Garage _____ Sq Ft TOTAL _____ Sq Ft		<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd: <input type="checkbox"/> UDC <input type="checkbox"/> HUD		<input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> ICF:		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>Fuel</td> <td>Nat Gas</td> <td>LP</td> <td>Oil</td> <td>Elec.</td> <td>Solid</td> <td>Solar</td> </tr> <tr> <td>Space Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Water Htg</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table> <input type="checkbox"/> Dwelling unit has 3 kilowatt or more electric space heating equip. Infiltration control option is <input type="checkbox"/> Sealing of all joints <input type="checkbox"/> Blower door test. <input type="checkbox"/> Exterior air infiltration barrier		Fuel	Nat Gas	LP	Oil	Elec.	Solid	Solar	Space Htg							Water Htg						
Fuel	Nat Gas	LP	Oil	Elec.	Solid	Solar																						
Space Htg																												
Water Htg																												
		5. STORIES		8. USE		10. SEWER																						
		<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other:		<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:		<input type="checkbox"/> Municipal <input type="checkbox"/> Septic Permit No.:																						
		<input type="checkbox"/> Plus Basement				11. WATER																						
						<input type="checkbox"/> Municipal Utility <input type="checkbox"/> Private On-Site Well																						
						13. HEAT LOSS (Calculated)																						
						Envelope _____ BTU/HR Infiltration _____ BTU/HR																						
						14. ESTIMATED COST OF 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 on the reverse side. 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.																												
APPLICANT'S SIGNATURE				DATE SIGNED																								
FEES:		APPROVAL CONDITIONS:		The permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.																								
Early Start																												
Building																												
Electrical																												
Plumbing																												
HVAC																												
MMSD		ISSUING JURISDICTION:		Village of McFarland		Municipality Number of Dwelling Location 1 3 - 1 5 4																						
Park Fund		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:																						
Erosion Control		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Occupancy <input type="checkbox"/> New Bldg or <input type="checkbox"/> Change of Use		(New UDC Homes Only)		Name _____ Date _____ Tel No. _____ 608-838-3154 Cert. No. _____																						
Wis. Seal																												
Occupancy																												
Water Impact																												
Library																												
Other:																												
TOTAL:	\$ _____																											

Copies to: Issuing Jurisdiction, State (if new dwelling), Inspector, and Owner/Agent

CAUTIONARY STATEMENT TO OWNERS OBTAINING BUILDING PERMITS

Sec. 101.65(lr) 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 Sec. 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 of 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 2-family dwelling code or an ordinance enacted under sub. (1) (a), because of any bodily injury to or 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 or 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.

CAUTIONARY STATEMENT TO CONTRACTORS FOR PROJECTS INVOLVING BUILDINGS BUILT BEFORE 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 square feet or more of paint per room, 20 square feet or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Save Renovation Training and Certification apply. Call (608)261-6876 or go to <http://dhs.wisconsin.gov/lead/WisconsinRRPRule.htm> for details on how to be in compliance.

WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources Wetlands Identification web page or contact a Department of Natural Resources Service Center.

ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRES OF SOIL

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

OWNER / APPLICANT'S SIGNATURE: _____ Date: _____