Inspection Specialists LLC P.O. Box 22	С	Wisconsin Uniform Building								Permit No.					
Brussels, WI 54204 (920) 495-3232		Permit Application							Parcel No.						
ISSUING MUNICIPALITY		☐ Town ☐ Village ☐ City					PROJECT LOCATION (Building Address)			Street, City, Zip					
		OF COUNTY					PROJECT DESCRIPTION								
Owner's Name	Mailing Address (Street,					City Zip)			Telephone						
Owner's Name	Mailing Address (Street,			, Ci	Сіту, Zip)			Telephone							
Dwelling Contractor Qualifier	Lic/Cert# Exp. Date			e	Mailing Address (Street, City, Zip)			Telephone							
Construction Contractor	Lic/Cert# Exp. Date			;	Mailing Address (S	))	Telephone								
Plumbing Contractor	Lic/Cert# Exp. Date		,	Mailing Address (S	))	Telephone									
Electrical Contractor	Lic/Cert	Lic/Cert# Exp. Date		;	Mailing Address (S	))	Telephone								
HVAC Contractor			Lic/Cert	Lic/Cert# Exp. Date			Mailing Address (S	))	Telephone						
1. PROJECT 3. OCCUPANCY			6. ELECTRIC			0	9. HVAC EQUIP. 12. ENERGY S			SOURCE					
					Panel		_	Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar	
□ New □ Repair	☐ Single Family ☐ Two Family		Amps:				] Furnace ] Radiant Basebd	Space Htg							
Addition Kaze		rage		Underground Overhead		ΠH	Heat Pump	Water Htg							
Other: Other:		ner:	7. FOUNDATIO			_	Boiler Central AC								
2. AREA INVOLVED 4. CONST. TYPE			Concrete				] Fireplace								
	Site		Masonry				Other:	13. HEAT LOSS							
	l. per WI UDC				1	0. SEWER	/HR Total Calculated nd Infiltration Losses (available from "Total								
Garage	<ul><li>Mfd. per US HUD</li><li>5. STORIES</li></ul>						Municipal		Building Heating Load" on Rescheck report)						
Decks			8. USE				Sanitary Permit#	14 FST BI	4. EST. BUILDING COST						
Other	□ 1-S □ 2-S			Seasonal		-	1. WATER								
		ner:		Permanent			Municipal	<u> </u>							
Total	sement					On-Site Well \$									
I understand that I: am subject to all applicable codes, laws, statutes and ordinances; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality, and the inspection agency or inspector; 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. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and storm water management. 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.															
Signature:    DATE															
APPROVAL CONDITIONS       This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.         See attached for additional conditions of approval.															
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WI Seal No.     FEES: <td colspan="8">Municipality No.      </td>							Municipality No.								
FEES:   PE     Building   \$			RIVITT NUIVIBER				AECEN I	I LIKIV	11 1550E	<b>JDI</b> .					
Electric \$Elec. #						(	CK #	— Name	Name						
Plumbing \$							N	1 vuine	1 valie						
Hvac\$Wis. State Seal\$Plmb			#				<u> </u>	Doto	Data Tal						
Zoning \$							Date	Date	Date Tel						
Sewer & Water \$	- HVAC #	HVAC #													
Other \$ Total \$	-					From	Cert No								