Application for Permit

CITY OF SHEBOYGAN FALLS - 375 BUFFALO ST, SHEBOYGAN FALLS, WI 53085 - (920) 467-7900 EXT 116. - FAX: (920) 467-2847

Date: _____ | For Office Use Only: | Permit # | | Parcel # | |

Property Owner's Name: _____ Phone #: _____

Address Where Work is to be Done: _____ Anticipated Start Date: _____

Permit expires 1 year from the date of issuance, not start date

Applicant's Name: _____ Phone #: _____

Permits Being Applied For / Work Being Performed (Mark All That Apply)

Building _____ Electrical _____ Plumbing _____ HVAC _____ Wrecking _____

Fence _____ Driveway _____ Sign _____ Moving _____ Other _____

For Use As: Res. _____ Comm. _____ Indust. _____ Agri. _____

BUILDING PERMITS ARE THE RESPONSIBILITY OF THE PROPERTY OWNER AND MUST BE APPLIED FOR AND PAID FOR BEFORE WORK BEGINS.

Description of Work:	

Type	Contractor's Name	Phone #	Cost Estimate	Certification #	Expires
Building					
HVAC					
Electrical					
Plumbing					
Work by Owner					

Fill in above estimates that pertain. For work done by homeowner, the listed cost above is automatically doubled to calculate permit fees and for the assessors.

Setbacks: Front Yard _____ ft Side Yard _____ ft Back Yard _____ ft

Accessory Building Size: _____ ft Wide x _____ ft Deep x _____ ft High

Building permits are issued and permit fees are collected at Sheboygan Falls City Hall during regular business hours:
Monday through Thursday, 7:30 a.m. to 4:00 p.m., and Friday, 7:30 a.m. to 12:00 p.m.
To-scale floor plans are required for interior room alterations and additions.
Plans or drawings are required for detached garages, sheds, decks, patios, and fences. Electronic files preferred.

The undersigned hereby applies for a permit to do the work herein desribed; agrees to comply with the Municipal Ordinances and conditions of this permit; understands that issuance of this permit creates no legal liability either expressed or implied, of the Department, Municipality, Agency, or Inspector; and certifies that all of the above information is accurate.

Signature of Applicant: _____ Date: _____

Email of Applicant and/or Homeowner: _____