



City of Burlington
 Building & Zoning Department
 300 N. Pine Street
 Burlington, WI 53105
 (262) 342-1164

BUILDING, MECHANICAL & MISC. PERMIT APPLICATION

PERMIT NO. _____

ZONING: _____

Project Address: _____

Project Description: _____

Residential Institutional Commercial Municipal Manufacturing Other

| | | | |
|-------------------------|------------------------------------|------------------------------------|--------------------|
| Owner's Name | Mailing Address—Include City & Zip | Telephone | Email |
| General Contractor | License No./Exp. | Mailing Address—Include City & Zip | Telephone Email |
| Construction Contractor | License No./Exp. | Mailing Address—Include City & Zip | Telephone Email |
| Plumbing Contractor | License No./Exp. | Mailing Address—Include City & Zip | Telephone Email |
| Electrical Contractor | License No./Exp. | Mailing Address—Include City & Zip | Telephone Email |
| HVAC Contractor | License No./Exp. | Mailing Address—Include City & Zip | Telephone Email |

| PROJECT INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--------------------------|------|-----|-------|-------|-------|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|--|
| Zoning District: | Lot Area: | Setbacks (Sq. Ft.): | Front: | Rear: | Left: | Right: | | | | | | | | | | | | | | | | | | | | | |
| 1a. PROJECT | 3. TYPE | 6. ELECTRICAL | 9. HVAC EQUIPMENT | 12. ENERGY SOURCE | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Raze <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Other _____ | <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____ | Entrance Panel Size: _____ amp Underground <input type="checkbox"/> Overhead <input type="checkbox"/> | <input type="checkbox"/> Forced Air Furnace <input type="checkbox"/> Radiant <input type="checkbox"/> Baseboard/Panel <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central A/C <input type="checkbox"/> Other _____ | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">Fuel Type</td> <td style="width: 10%;">Gas</td> <td style="width: 10%;">L.P.</td> <td style="width: 10%;">Oil</td> <td style="width: 10%;">Elec.</td> <td style="width: 10%;">Solid</td> <td style="width: 10%;">Solar</td> </tr> <tr> <td>Space Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> | Fuel Type | Gas | L.P. | Oil | Elec. | Solid | Solar | Space Htg | <input type="checkbox"/> | Water Htg | <input type="checkbox"/> Dwelling unit will have 3 kw or more installed electric space heater equipment Infiltration control option is: <input type="checkbox"/> Full sealing of joints <input type="checkbox"/> Blower door test <input type="checkbox"/> Exterior air filtration barrier | |
| Fuel Type | Gas | L.P. | Oil | Elec. | Solid | Solar | | | | | | | | | | | | | | | | | | | | | |
| Space Htg | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | |
| Water Htg | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | |
| 1b. GARAGE | 4. CONST. TYPE | 7. FOUNDATION | 10. PLUMBING | | 13. HEAT LOSS (Calculated) | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Attached <input type="checkbox"/> Detached | <input type="checkbox"/> Site Manufactured <input type="checkbox"/> Manufactured | <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Treated Wood <input type="checkbox"/> Other _____ | <input type="checkbox"/> Municipal Sewer <input type="checkbox"/> Septic Sewer <input type="checkbox"/> Permit No. _____ | | Envelope _____ BTU/HR Infiltration _____ BTU/HR | | | | | | | | | | | | | | | | | | | | | | |
| 2. AREA | 5. STORIES | 8. USE | 11. WATER | | 14. ESTIMATED COST OF PROJECT | | | | | | | | | | | | | | | | | | | | | | |
| Basement _____ Sq. Ft. Living Area _____ Sq. Ft. Garage _____ Sq. Ft. Other _____ Sq. Ft. Total _____ Sq. Ft. | <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"/> Municipal Utility <input type="checkbox"/> Private On-Site Well | | | | | | | | | | | | | | | | | | | | | | | | |

I expressly grant the building inspector, or 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. I agree to comply with Municipal Ordinances and with the conditions of this permit; understand that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certify that all the above information is accurate. Have Permit/Application number and address when requesting inspections. Call (262) 342-1164. **Give at least 24 hours' notice of all inspections.**

SIGNATURE OF APPLICANT _____ **DATE** _____
Print Name _____

APPROVAL CONDITIONS: This permit is issued pursuant to the attached conditions. Failure to comply may result in suspension or revocation of this permit or other penalties. *Project shall be constructed according to state and local codes.*

| | | |
|--|---|---|
| FEES: | MUNICIPALITY NUMBER OF DWELLING LOCATION : 51 - 206 | |
| Building: _____ Zoning: _____ WI Seal: _____ Plumbing: _____ Electrical: _____ HVAC: _____ Erosion Ctrl: _____ Other: _____ TOTAL FEES: _____ | Wis. UNIFORM PERMIT SEAL NO. | PERMIT ISSUED BY MUNICIPAL AGENT: |
| | | Name _____ Date _____ Certification No. _____ |