

Sprinkler Permit Application

PERMIT # _____

Project Location: _____

Owner name: _____

Address: _____

Contractor name: _____

Address: _____

Plan reviewer: _____

Address: _____

Type: New _____ Addition _____

Modification _____

Fee: \$.02 per sq foot x _____ sq ft. += _____

Minimum permit fee \$75.00

Failure to call for inspection \$75.00

TRIPPLE FEE'S WILL BE CHARGED IF WORK STARTS PRIOR TO PERMIT BEING ISSUED

Inspections needed: Rough X Test/Witness X Final X

This applicant agrees to comply with the municipal ordinances and with the conditions of this permit; understands that issuance of the permit creates no legal liability, express or implied, of the Department, Municipality, Agency, or inspector; and certifies all the above information is accurate. Have Permit/Application number and address when requesting inspection. Call 920-746-2916. Give at least 24 hr. notice on all inspections

Signature of Applicant: _____ Date: _____

CONDITIONS OF APPROVAL

This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Structures requiring a sprinkler system either by Municipal Ordinance or by the requirements specified in the Wisconsin Administrative Code, shall comply with all municipal and state requirements. All plans and specifications are required to have a third party plan review, by a registered professional, prior to the issuance of a sprinkler permit.

Permit issued by: _____ Date: _____

FEE: \$100.00

Blasting Permit Application

PERMIT # _____

Project Location: _____

Contractor name: _____

Address: _____

Frequency: _____

Date: _____

Notifications: _____

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Signature of Applicant: _____ Date: _____

Permit issued by: _____ Date: _____

FEE: \$75.00

Fireworks Permit Application

PERMIT # _____

Project Location: _____

Contractor name: _____

Address: _____

Frequency: _____

Date: _____

Notifications: _____

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Signature of Applicant: _____ Date: _____

Permit issued by: _____ Date: _____