CITY OF WAUPACA
DEPARTMENT OF INSPECTION
111 S. MAIN STREET
WAUPACA, WI 54981
PHONE: 715-942-9908 · FAX: 715-258-4426

PERMIT NO: _____

PARCEL NO: _____

☐ 1 & 2 Family
☐ Commercial

APPLICATION FOR FENCE PERMIT

OWNERS NAME: _____ **PHONE NO:** _____

MAILING ADDRESS: _____ **Contact Name:** _____

CONTRACTOR'S NAME: _____ **Contractor Qualifier #** _____

ADDRESS: _____ **Dwelling Contractor #** _____

PHONE NO: _____ **Email address:** _____

PROJECT TYPE:

☐ Alteration ☐ Deck
☐ ReRoofing ☐ Raze
☒ Other ☐ Move

Fence

AREA INVOLVED:

Deck area 0 sq. ft.

State Approved Plans Required?
Yes ☐ No ☐
Transaction ID# _____
Site ID# _____

PROJECT LOCATION:

Project Address: _____
Zoning District: R-1

Setbacks: Front ____ ft. Rear ____ ft.
Left ____ ft. Right ____ ft.

Estimated Cost: _____

% OPEN SPACE:

Structures _____ sq. ft.
Other _____ sq. ft.
Total 0 sq. ft.
Total Lot Area 8,000 sq. ft.

Fence Application Instructions link

Plot Plan N^

Show shape and size of lot and location and size of existing and proposed buildings and structures with distances from lot lines.

Fence

DESCRIPTION OF WORK: _____

I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; 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 certify that all the above information is accurate. 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 stormwater management and the owner shall sign the statement on the back of the permit if not signing below. 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.

☒ I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply of this form. As a courtesy to your neighbors, please refrain from noise making activities outside the hours of 7 am to 8 pm, Monday thru Saturday.

APPLICANT'S SIGNATURE: _____ **Date Signed** _____

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.

Please Call 715-942-9908 to arrange for required inspections when work is complete.

Build: SPS 320-325; Plumbing: SPS 382-384; Electrical: SPS 316 & NEC 2011

BUILDING INSPECTOR: John Lust **ISSUER CERTIFICATION #** 255213

DATE ISSUED: _____

FEE $ $0.00 **RECEIPT #** _____

Reset Form

All fees effective September, 2010

v.1.3 effective 6-24-14

Show Fee Schedule or Blank Form | Pay Online | Email This Form | Print Form

(Part of Ply 4 for Applicants)

Cautionary Statement to Owners Obtaining Building Permits

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 s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily inquiry 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 by 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 two- 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 Building Built Before 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608)261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance

Wetlands Notice to Permit Applicants

You are responsible for complying with state and federal laws concerning the 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 Acre 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's Signature: _____ Date:_____

Contractor Credential Requirements

All contractors shall possess an appropriate contractor credential issued by the Wisconsin Division of Safety and Buildings. Contractors are also required to only subcontract with contractors that hold the appropriate contractor credentials.