

Application Date:	<b>Residential</b> <b>Accessory Structure / Building / Fence</b> <b>Permit Application</b> <i>Please print legibly and complete all sections.</i>		City of Superior Building Inspection Division 1316 N. 14 <sup>th</sup> St. Superior, WI 54880 Phone: 715-395-7288 Fax: 715-395-7346	
Logged In: (date and initial)				
Permit #:				
Parcel #:	<b>PROJECT ADDRESS:</b>		Contacted for Payment on:	By:
Permit(s) Required:	<input type="checkbox"/> Construction	<input type="checkbox"/> HVAC	<input type="checkbox"/> Electric	<input type="checkbox"/> Plumbing
<b>Owner's Name(s)</b>		<b>Owner's Mailing Address</b>		
Phone #:	Fax #/Phone #:	Email:		
Applicant is:	<input type="checkbox"/> Owner	<input type="checkbox"/> Contractor	<input type="checkbox"/> Agent	
<b>Applicant Name &amp; Business Name</b>		<b>Mailing Address</b>		
Phone #:	Fax #/Phone #:	Email:		
WI Dept of Commerce Contr. License #		WI Dept of Commerce Contr. Qualifier #		
<b>Designer/Architect/Engineer Name</b>		<b>Mailing Address</b>		
Phone #:	Fax #/Phone #:	Email:		
State License/Registration #(s):				
<b>Location &amp; Project Details</b> (Check all that apply)				
Type of Structure:	<input type="checkbox"/> One Family Dwelling	<input type="checkbox"/> Two Family Dwelling		
Type of Work:	<input type="checkbox"/> Attached Garage <input type="checkbox"/> Deck (including deck steps) <input type="checkbox"/> Porch <input type="checkbox"/> Pergola <input type="checkbox"/> Yard Shed <input type="checkbox"/> Fence		<input type="checkbox"/> Detached Garage <input type="checkbox"/> Exterior Entry Stairway <input type="checkbox"/> Canopy <input type="checkbox"/> Carport <input type="checkbox"/> Shade Structure <input type="checkbox"/> Other similar structures	
<i>Site plan required for zoning compliance Exempt: No permit, no fee – yard sheds under 65 sq. ft. Above ground pool more than 150 sq. ft. in size and over 36 inches deep (in ground – see electrical)</i>				
Site Plan to be submitted with Application. Setbacks from: Front Yard: _____ Back Yard: _____ Side Yard: _____ Height: _____				
<b>Please provide a descriptive summary of the proposed project below:</b>				
_____				
_____				
_____				
<b>This project will also include:</b>		<b>Other Contractor Information</b>		<b>Phone #</b>
<input type="checkbox"/> Electrical work				
<input type="checkbox"/> Plumbing work				
<input type="checkbox"/> HVAC work				
<input type="checkbox"/> Gas Piping				
<b>*PROJECT COST: \$</b>				
<b>Fee Summary</b>		Fees		Sub-Total
Accessory Structures	Total Sq. Ft.	\$00.25 per sq. ft. (min fee \$30.00)		\$
Fence		\$30.00		\$
Receipt #	Rev'd By:	<b>Grand Total</b>		
<i>*Estimated construction cost must be reasonable and verifiable. Construction cost to include fair market value of labor and materials</i>				

- The applicant agrees to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed or implied, on the City Agent/Inspector, Department or Municipality; and certifies that all the above information is true and accurate.
- Approval or disapproval of plans shall be based upon review of written and graphic information submitted.
- Changes made during construction shall be based upon approved revised plans.
- Any change in the conditionally approved plans shall be approved by this department before said changes are implemented.
- It is expressly understood by the project owner(s) and/or contractor(s) that by issuance of this permit any City Agent/Inspector shall be allowed to inspect at reasonable times any construction work through the final inspection.
- Failure to allow access to the premises for such inspection(s) shall result in revocation of this permit.

**This is a Building Permit application only – not a permit to proceed.**

Applicant Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date: \_\_\_\_\_

- I certify that the information provided on this form is complete and accurate.

**Approvals**

SAMP Approved	Erosion Control Approved	Zoning Approved	Building Approved
			Cert No.:
Date	Date	Date	Date
<b>Conditions of Approval</b>	This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.		

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