

Village of McFarland Community Development Department 5915 Milwaukee Street, P.O. Box 110 McFarland, WI 53558-0110		VILLAGE OF MCFARLAND PERMIT APPLICATION (complete areas highlighted in yellow) (read and sign front and reverse)				Permit No. _____ Parcel No. _____	
PERMIT REQUESTED		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion <input type="checkbox"/> Occupancy					
Owner's Name			Mailing Address			Tel.	
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Exp.	Mailing Address		Tel.	
						email	
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Exp.	Mailing Address		Tel.	
						email	
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Exp.	Mailing Address		Tel.	
						email	
Contractor's Name: <input type="checkbox"/> Con <input type="checkbox"/> Elec <input type="checkbox"/> HVAC <input type="checkbox"/> Plbg		Lic/Cert#	Exp.	Mailing Address		Tel.	
						email	
PROJECT LOCATION		Lot area _____ Sq. ft.		_____ of Section _____, T _____ N, R _____ E (or) W			
Building Address _____		Subdivision Name _____			Lot No. _____	Block No. _____	
Zoning District(s) _____	Set-backs: _____	Front ft. _____	Rear ft. _____	Left ft. _____	Right ft. _____	COMMERCIAL - Fire Protection System Work Permit App. Date: _____ <input type="checkbox"/> Orig to applicant <input type="checkbox"/> Copy to Fire Dept.	
Project Description*:							
1. PROJECT		3. OCCUPANCY		6. ELECTRICAL		9. HVAC EQUIPMENT	
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze * <input type="checkbox"/> Addition <input type="checkbox"/> Move Occupancy <input type="checkbox"/> New Bldg or <input type="checkbox"/> Change of Use		<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Other:		Entrance Panel Amps: <input type="checkbox"/> Underground <input type="checkbox"/> Overhead		<input type="checkbox"/> Forced Air Furnace <input type="checkbox"/> Radiant Baseboard/Panel <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central Air Conditioning <input type="checkbox"/> Fireplace or Other:	
2. AREA INVOLVED		4. CONST. TYPE		7. WALLS		12. ENERGY SOURCE	
Unfin. _____ sq ft Bsmt _____ sq ft Living _____ sq ft Area _____ sq ft Deck _____ sq.ft. Garage _____ sq ft Porch/Balcony _____ sq.ft. TOTAL _____ sq ft		<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd: <input type="checkbox"/> UDC <input type="checkbox"/> HUD		<input type="checkbox"/> Wood frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other		Fuel _____ Nat Gas _____ LP _____ Oil _____ Elec. _____ Solid _____ Solar _____ Space Htg _____ Water Htg _____ <input type="checkbox"/> Dwelling unit has 3 kilowatt or more electric space heating equip. Infiltration control option is <input type="checkbox"/> Sealing of all joints <input type="checkbox"/> Blower door test. <input type="checkbox"/> Exterior air infiltration barrier	
		5. STORIES		8. USE		10. SEWER	
		<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement		<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:		<input type="checkbox"/> Municipal <input type="checkbox"/> Septic Permit No.: _____	
				11. WATER		13. HEAT LOSS (Calculated)	
				<input type="checkbox"/> Municipal Utility <input type="checkbox"/> Private On-Site Well		Envelope _____ BTU/HR Infiltration _____ BTU/HR	
						14. ESTIMATED COST OF PROJECT	
						\$ _____	
I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If I am an owner applying for an erosion control or construction permit, I have read the cautionary statement regarding contractor financial responsibility on the reverse side. 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.							
APPLICANT'S SIGNATURE _____				DATE SIGNED _____			
FEES:		APPROVAL CONDITIONS:		The permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.			
Early Start							
Building							
Electrical							
Plumbing							
HVAC							
MMSD		ISSUING JURISDICTION:		Village of McFarland		Municipality Number of Dwelling Location 1 3 - 1 5 4	
Park Fund		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:	
Erosion Control		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion <input type="checkbox"/> Occupancy <input type="checkbox"/> New Bldg or <input type="checkbox"/> Change of Use		(New UDC Homes Only)		Name _____	
Wis. Seal				PAYMENT INFO		Date _____	
Occupancy						Tel No. _____ 608-838-3154	
Water Impact						Cert. No. _____	
Library							
Other:							
TOTAL:	\$ _____						

Copies to: Issuing Jurisdiction, State (fill out online application), Inspector, and Owner/Agent

*For an accessory structure/shed, driveway or fence permit - Applicant must include a site plan of the proposed location of the project with measurements, and a description of materials to be used (dimensions, material type, material color). This may include a representative photo/image of the structure/fence.

*For a raze permit – Applicant must contact Public Works at (608)838-7287 to make arrangements for the return of the water meter on the property prior to this permit being issued.

CAUTIONARY STATEMENT TO OWNERS OBTAINING BUILDING PERMITS

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

(a) The owner may be held liable for any bodily injury 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 of 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 2-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.

Per Section 23- 119 (e) (3) Those who wish to appeal payment of impact fees must do so in writing to the Village Administrator within thirty days of payment of fees.

CAUTIONARY STATEMENT TO CONTRACTORS FOR PROJECTS INVOLVING BUILDINGS BUILT BEFORE 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 square feet or more of paint per room, 20 square feet or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Save Renovation Training and Certification apply. Call (608)261-6876 or go to <http://dhs.wisconsin.gov/lead/WisconsinRRPRule.htm> for details on how to be in compliance.

WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning 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 ACRES 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 / APPLICANT'S SIGNATURE: _____

Date: _____