

262-346-4577  
**SAFEbuilt**  
**WI UNIFORM PERMIT APPLICATION**  
 hartfordinspections@safebuilt.com  
 Inspections need to be called in by 4 pm for next business day inspections.  
 PERMIT NO. \_\_\_\_\_ TAXKEY# \_\_\_\_\_

ISSUING MUNICIPALITY  
 OF THIENSVILLE  
 COUNTY OZAWAEE  
 PROJECT LOCATION (Building Address) 407N. MAIN ST. THIENSVILLE WI 53092  
 PROJECT DESCRIPTION PRO HARBOR CHLOROPANE  
 ONE & TWO FAMILY  
 COMMERCIAL

Owner's Name DR. ERIC STANBURY Mailing Address - include City & Zip 134 N. MAIN ST. STE 202 THIENSVILLE WI 53092  
 Construction Contractor (DCOLic No.) \_\_\_\_\_ Mailing Address - include City & Zip \_\_\_\_\_ Telephone - include Area Code \_\_\_\_\_  
 Dwelling Contractor Qualifier (DCOLic No.) \_\_\_\_\_ Mailing Address - include City & Zip \_\_\_\_\_ Telephone - include Area Code \_\_\_\_\_  
 CEO, COB or employees of Dwelling Contractor \_\_\_\_\_

Plumbing Contractor (Lic No.) \_\_\_\_\_ Mailing Address - include City & Zip \_\_\_\_\_ Telephone - include Area Code \_\_\_\_\_  
 Electrical Contractor (Lic No.) \_\_\_\_\_ Mailing Address - include City & Zip \_\_\_\_\_ Telephone - include Area Code \_\_\_\_\_  
 HVAC Contractor (Lic No.) \_\_\_\_\_ Mailing Address - include City & Zip \_\_\_\_\_ Telephone - include Area Code \_\_\_\_\_

**PROJECT INFORMATION**  
 Zoning District B-3 Lot Area 17,500 Sq. Ft. Subdivision Name \_\_\_\_\_  
 N, S, E, W, Setbacks \_\_\_\_\_  
 Front 5 Fl. Rear 25 Fl. Left 15 Fl. Right 15 Fl.

1a. PROJECT  New  Addition  Raze  Single Family  Two Family  Multi  Alteration  Repair  Move  Commercial  
 3. TYPE \_\_\_\_\_  
 4. CONST. TYPE  1-Story  2-Story  Other PERSON

1b. GARAGE  Attached  Detached  
 5. ELECTRICAL  Site Constructed  Mid UDC  Mid HUD  Concrete  Masonry  Treated Wood  ICF  Other \_\_\_\_\_  
 6. USE  Seasonal  Permanent  Other \_\_\_\_\_  
 7. FOUNDATION  Sewer  Municipal  Septic No. \_\_\_\_\_  
 8. WATER  Municipal Utility  Private On-Site Well

2. AREA Basement 1,012 Sq. Ft. 1st Floor 17,275 Sq. Ft. Garage 3,215 Sq. Ft. Other 4,287 Sq. Ft. TOTAL 4,287 Sq. Ft.  
 9. HVAC EQUIPMENT  Forced Air Furnace  Radiant Baseboard or Panel  Heat Pump  Boiler  Central Air Conditioning  Other \_\_\_\_\_  
 10. PLUMBING  Dwelling unit will have 3 kilowatt or more installed electric space heater equipment capacity.  
 11. HEAT LOSS (Calculated) \_\_\_\_\_ BTU/HR  
 12. ESTIMATED COST \$ \_\_\_\_\_

I understand that I am subject to all applicable codes, laws, statutes and ordinances, including those described on the Notice to Permit Applicants 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 Notice to Permit Applicants form. 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 Notice to Permit Applicants form.  
 APPLICANT (PRINT): Eric Stanbury SIGN: Eric Stanbury DATE: 1/10/20

**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 penalty. Owner/Builder solely responsible for compliance with all applicable State & Local Building and Zoning codes.  
**INSPECTIONS NEEDED** Building  Footing  Foundation  Rough  Insulation  Bsm. Fl.  Final  HVAC  Rough  Final  
 Electric  Rough  Service  Final  Plumbing  Rough  Underfloor  Final  HVAC  Rough  Final

**FEES:** Building Fee \_\_\_\_\_ Zoning # \_\_\_\_\_ Bldg. # At top of form \_\_\_\_\_  
 WI Seal \_\_\_\_\_ Zoning # \_\_\_\_\_ Elec. # \_\_\_\_\_  
 Electric Fee \_\_\_\_\_ Plumbing Fee \_\_\_\_\_ Pmb. # \_\_\_\_\_  
 HVAC Fee \_\_\_\_\_ Adm. Fee \_\_\_\_\_ HVAC # \_\_\_\_\_  
 Other \_\_\_\_\_ From \_\_\_\_\_  
 Total \_\_\_\_\_ Rec By \_\_\_\_\_  
 SEAL NO. \_\_\_\_\_ MUNICIPALITY NO. \_\_\_\_\_  
 RECEIPT CK # \_\_\_\_\_ PERMIT EXPIRATION: \_\_\_\_\_ PERMIT ISSUED BY MUNICIPAL AGENT: \_\_\_\_\_  
 Amount \$ \_\_\_\_\_ Permit expires two years from date issued unless municipal ordinance is more restrictive. \_\_\_\_\_  
 Date \_\_\_\_\_ Name \_\_\_\_\_  
 Certification No. \_\_\_\_\_