

CITY OF FRANKLIN BUILDING PERMIT APPLICATION 9229 W. LOOMIS ROAD, FRANKLIN, WI 53132 Phone (414) 425-0084 Fax (414) 425-7513 (applications can be downloaded at www.franklinwi.gov)						Application No.	
						Permit No.	
						Parcel No.	
Property Owner's Name						Phone	
Mailing Address				City		Zip	
Email Address							
Contractors doing work on single or two family homes must provide both UDC certification numbers for the company and for the qualifier. Please include copies of both cards along with each application.							
Contractor Name						Dwelling Contractor Cert#	
Dwelling Contr. Qualifier's Name (if work is on 1 or 2 family dwellings)						Dwelling Contractor Qualifier Cert#	
Mailing Address				City		Zip	
Email Address			Phone		Fax		
Applicant (if other than owner or contractor)						Phone	
Mailing Address				City		Zip	
Email Address			Phone		Fax		
Job/Building Address				Project/Business Name (if applicable)			Unit or Suite No.
Zoning District(s)	Corner Lot/DbI/Triple Frontage		Setbacks:	Front	Rear	Left	Right
				ft.	ft.	ft.	ft.
Project Type: <input type="checkbox"/> 1 & 2 Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institutional <input type="checkbox"/> Multi Family - # of Units _____							
PERMIT TYPE:							
<input type="checkbox"/> New Construction		<input type="checkbox"/> Hot Tub/Spa		<input type="checkbox"/> On Slab		<input type="checkbox"/> On Deck	
<input type="checkbox"/> Addition		<input type="checkbox"/> Fence – Type and Height _____					
<input type="checkbox"/> Alteration		<input type="checkbox"/> Pool		<input type="checkbox"/> Above Ground		<input type="checkbox"/> In Ground	
<input type="checkbox"/> Demolition		<input type="checkbox"/> Deck		<input type="checkbox"/> Attached		<input type="checkbox"/> Detached	
<input type="checkbox"/> Repair		<input type="checkbox"/> Accessory Building		<input type="checkbox"/> On Concrete Slab		<input type="checkbox"/> On Wood Floor	
<input type="checkbox"/> Move		<input type="checkbox"/> Other _____					
<input type="checkbox"/> Foundation Repair # of Courses Basement Wall _____				Size of Reinforcement Beams _____			
<input type="checkbox"/> Occupancy -- \$200 plus \$5 Technology Fee							
Project Description: _____						Estimate of Cost \$ _____	
Cautionary Statement To Owners Obtaining Building Permits							
101.65(Ir) 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 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 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.							
CONTACT PERSON (print) _____						PHONE _____	
APPLICANT'S SIGNATURE _____						DATE _____	
SEPARATE PERMITS REQUIRED FOR PLUMBING, ELECTRICAL AND HVAC							
BLDG PERMIT APP 9/2010							