



## PERMIT SUBMITTALS FOR NEW CONSTRUCTION, ADDITIONS AND ALTERATIONS FOR COMMERCIAL, INDUSTRIAL, & MULTI-FAMILY BUILDINGS

The City of Franklin Inspection Department may do the plan review in lieu of the Department of Commerce for buildings meeting the requirements of the scoping section below. The City of Franklin is a Certified City as required to do these plan reviews.

**Scope:** Drawings, specifications, and calculations for all the types of buildings and structures specified in s. Comm 61.30, except state-owned buildings and structures, to be constructed within the limits of a municipality or county that is not included in pars. (a) and (b) shall be submitted to either the department or to that municipality or county if the municipality or county has assumed the responsibilities of plan examination and building inspection in accordance with sub. (2) and if the plans are for any of the following:

1. A new building or structure containing less than 50,000 cubic feet of total volume.
2. An addition to a building or structure where the area of the addition results in the entire building or structure containing less than 50,000 cubic feet of total volume.
3. An addition containing no more than 2,500 square feet of total floor area and no more than one floor level, provided the largest roof span does not exceed 18 feet and the exterior wall height does not exceed 12 feet.
4. An alteration of a space involving less than 100,000 cubic feet of total volume.

### **Applications submitted for Building Permits shall include all of the following information:**

- Five (5) copies of architect signed and sealed plans, two (2) of the copies shall be sets approved by the Department of Commerce when Department of Commerce does plan review. **(New Construction, Additions, Alterations)**
- One (1) copy of the SBD-118 form. **(New Construction, Additions, Alterations)**
- One (1) copy of structural calculations, signed and sealed. **(New Construction, Additions, Structural Alterations)**
- One (1) copy of the Wisconsin Energy Efficiency plan check worksheets or computer calculations signed and sealed. **(New Construction, Additions, Alterations)**
- One (1) copy of the Wisconsin Lighting calculations signed and sealed. Calculations may be submitted on or before rough framing if plans are not for alterations. **(New Construction, Additions, Alterations)**
- One (1) copy of the Building specifications (IF NOT ON PLANS). **(New Construction, Additions)**  
**(PDF format preferred)**
- Five (5) copies of the building stake out survey, done by a Wisconsin registered land surveyor. **(New Buildings & Additions only)**  
**Do not attach surveys to plans.**
- One (1) completed copy of the Milwaukee Metropolitan Sewerage District's Notice of Intent form. Applicant must mail or fax a copy to the MMSD. **(When Discharge is New, Changed or Altered)**
- The size of the domestic water service (not sprinkler lateral) **(New Commercial or Industrial Buildings)**
- Water Impact Fee form **(Submit for all Commercial, Industrial & Institutional)**
- Estimated cost of construction without plumbing, electrical, and mechanical costs.

### Plan exam fees:

- New Building - Commercial/Industrial/Institutional (under 100,000 sq. ft.) \$300.00
- New Building -Commercial/Industrial/Institutional (100,000 sq. ft. & larger) \$500.00
- Additions/Alterations - Commercial/Industrial/Institutional Buildings
  - 1 to 1,000 Sq. Ft. \$220.00
  - 1,001 to 2,500 Sq. Ft. \$300.00
  - 2,501 to 5,000 Sq. Ft. \$350.00
  - 5,001 to 10,000 Sq. Ft. \$400.00
  - 10,001 Sq. Ft. and over \$500.00
- New - Multi-Family/CBRF/Institutional \$300.00 plus \$25/unit
- Additions/Alterations - Multi-Family/CBRF/Institutional \$200.00 plus \$25/unit

### Plan and Permit Review Process

- Plans are reviewed and permits are issued on a first in, first out basis. Please feel free to call on the status of your permit review.
- Projects shall have **completed** Planning, Economic Development, and Engineering Department project approval processes prior to application for a permit.
- Plans submitted for Building Permits are distributed to the Engineering, Planning and Zoning, and Fire Departments as well as the Inspection Department for technical plan and code review and approvals.
- Reviewing Departments will contact the submitter regarding additional information, questions, or plan revisions required. Permits remain in a "pending" condition until any questions, plan corrections or changes, requests for information, or other items are resolved or submitted.
- Departments complete their review and return approvals or conditional approvals to the Inspection Department.
- The Inspection Department completes the review processes, calculates fees, and issues a permit when all City Departments have approved the plans. The following fees (when applicable) are due at the time of permit pickup: building permit fee, occupancy fee, impact fees (including water impact), technology fee, and sewer connection fees.

<b>CITY OF FRANKLIN</b> <b>BUILDING PERMIT APPLICATION</b> 9229 W. LOOMIS ROAD, FRANKLIN, WI 53132 Phone (414) 425-0084 Fax (414) 425-7513 <b>(applications can be downloaded at www.franklinwi.gov)</b>	Application No.
	Permit No.
	Parcel No.

Property Owner's Name	Phone
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Mailing Address	City	Zip
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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#
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Dwelling Contr. Qualifier's Name (if work is on 1 or 2 family dwellings)	Dwelling Contractor Qualifier Cert#
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Mailing Address	City	Zip
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Email Address	Phone	Fax
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Applicant (if other than owner or contractor)	Phone
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Mailing Address	City	Zip
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Email Address	Phone	Fax
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<b>Job/Building Address</b>	Project/Business Name (if applicable)	Unit or Suite No.
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Zoning District(s)	Corner Lot/DbI/Triple Frontage	Setbacks:	Front ft.	Rear ft.	Left ft.	Right ft.
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Project Type:     1 & 2 Family     Commercial     Industrial     Institutional     Multi Family - # of Units \_\_\_\_\_

**PERMIT TYPE:**

<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Foundation Repair # of Courses Basement Wall _____ Size of Reinforcement Beams _____ <input type="checkbox"/> Occupancy -- \$200 plus \$5 Technology Fee	<input type="checkbox"/> Hot Tub/Spa <input type="checkbox"/> On Slab <input type="checkbox"/> On Deck <input type="checkbox"/> Fence – Type and Height _____ <input type="checkbox"/> Pool <input type="checkbox"/> Above Ground <input type="checkbox"/> In Ground <input type="checkbox"/> Deck <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Accessory Building <input type="checkbox"/> On Concrete Slab <input type="checkbox"/> On Wood Floor <input type="checkbox"/> Other _____
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Project Description: \_\_\_\_\_ Estimate of Cost \$ \_\_\_\_\_

**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 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** \_\_\_\_\_

**Wisconsin Department of Safety and Professional Services**  
**Application for Review - Buildings, HVAC, Lighting,**  
**Fire and Components – SBD-118**

Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m), Stats.]

Office Use Only: Trans ID: \_\_\_\_\_

Assigned Reviewer: \_\_\_\_\_

Assigned Office: \_\_\_\_\_

Reviewer Start Date: \_\_\_\_\_

**For scheduling** of building, HVAC, and fire plans, use the electronic online request for commercial building plan appointments: <http://dsps.wi.gov/sb/SB-DivPlanReview.html>. This form is to be used only for mailing or dropping off plans without an appointment, or if you are scheduling a **Revision** via Fax (see Box 13 for further information). Check website: at <http://dsps.wi.gov/sb/SB-DivForms.html> for the most current version of this form. **S&B may re-distribute plans to another office if needed to reasonably balance turnaround times.** You may monitor the status of your plan: <http://dsps.wi.gov/sb/SB-DivReviewStatusSearch.html>

Enter Previous Related Trans. ID if applicable: \_\_\_\_\_  
**If no previous related transaction is provided, plan review will be based on the current code, except for revisions. If a previous related transaction is entered and the parent building approval transaction has not expired, you may elect below to use the code in effect at the time of that approval for follow-up revision, HVAC, and fire protection submittals related to that building approval. Note that this submittal's approval would then expire no later than the parent building approval.**  
 Please review under the code in effect at the time of the parent building approval.

Circle your choice of office: 1. Next available appt in any office 2. Green Bay  
 3. Hayward 4. LaCrosse 5. Madison 6. Waukesha

For Scheduling Revisions by Fax - Enter date plan will be in our office: \_\_\_\_\_

Where should we send the appointment confirmation:  Email:  Fax \_\_\_\_\_

- Requested (check all that apply)**
- New
  - Alteration – Level:  1  2  3
  - Addition/Alteration–Level:  1  2  3
  - Approval Extension
  - Revision
  - Footing & Foundation Plans Only
  - Permission to Start
  - Follow Up of a Denial Within 8 Months
  - Preliminary Consultation (contact reviewer before scheduling or submitting)
  - Structural Framework Only
  - Building Shell
  - Multiple Identical Buildings (see box 5)  
 Number of Buildings \_\_\_\_\_

**b. Objects Submitted for Review as Current Review (check all that apply)**

- Building
  - HVAC
  - Fire Suppression (see box 7)
  - Fire Detection/Alarm (see box 7)
- Other Projects** (Stand Alone from above)
- Bleacher
  - Canopy
  - Kitchen Exhaust Hood
  - Membrane Construction
  - Rack Supported Storage Building
  - Elevated Pedestrian Access

**c. Structural Component Plan(s) which accompany this current plan submittal**

- Major Use – Check Use with the Greatest Floor Area
- A Assembly
  - B Business/Office
  - E Educational
  - F Factory/Industrial
  - H Hazardous
  - I Institutional/Daycare/CBRF
  - M Mercantile/Retail
  - R Residential
  - S Storage
  - U Utility/Misc
- Occupancies – Circle All that Apply )
- A1 A2 A3 A4 A5
  - B
  - E
  - F1 F2
  - H1 H2 H3 H4 H5
  - I1 I2 I3 I4
  - M
  - R1 R2 R3 R4
  - S1 S2
  - U

- Construction Class – Circle One
- IA IB IIA IIB IIIA IIIB IV VA VB
- Area (project area, include all levels): \_\_\_\_\_ sq ft  
 If different, Heated/ventilated Area: \_\_\_\_\_ sq. ft  
 Sprinklered/Detector Protected Area: \_\_\_\_\_ sq. ft
- Number of Floor Levels \_\_\_\_\_  
 Total Building Volume < 50,000 Cu. Ft. \_\_\_Yes \_\_\_No
- Seismic Review Threshold (circle one)
1. B-F and greater than 1 story 2. A or 1 story  
 3. Non-Structural Alteration

**4. Project Information – Fill in all known information** Site Number If Known \_\_\_\_\_

Project/Site Name \_\_\_\_\_  
 Tenant name or building designation \_\_\_\_\_

**5. Identical Buildings (NOTE: Complete a separate application for each non-identical building)**

Number & Street	Building/Facility Name/Designation	Building/Facility Address
County	City ( ) Village ( ) Town ( ) of	

**6. After plans are reviewed, please: (check all that apply) \*Refers to customer number from below**

Call customer 1, 2, 3, 4 (circle number)\*  Mail plans to customer 1, 2, 3, 4 (circle number)\*

**Designer Information (Customer 1)** First Time Submitter \_\_\_Yes \_\_\_No

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Customer Number \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 (9 digits) \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Check all applicable

Designer of \_\_\_Bldg \_\_\_HVAC, \_\_\_Lighting \_\_\_Fire Alarm \_\_\_Fire Suppression

**Designer Information (Customer 2)** First Time Submitter \_\_\_Yes \_\_\_No

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Customer Number \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 (9 digits) \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

Check all applicable

Designer of \_\_\_Bldg \_\_\_HVAC, \_\_\_Lighting \_\_\_Fire Alarm \_\_\_Fire Suppression

**Property Owner (not lessee) Information (Customer 3)**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Customer Number \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 (9 digits) \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**Other (Customer 4) \_\_\_Add'l Owner \_\_\_Designer \_\_\_Mail to \_\_\_Payer**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Customer Number \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4 (9 digits) \_\_\_\_\_

Phone Number (area code) \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_



11. Fee Calculation Instructions  
 Fee Schedule Summary: Wisconsin Building Code  
 Calculate appropriate fee on page 4 and enter total on Page 4.

- I. **Building, heating and ventilation, fire alarm and suppression plans.** Fees relating to the submittal of all building and heating and ventilation plans (new, addition, alteration) and fire alarm and fire suppression plans shall be computed on the basis of the total gross floor area of each building, area of addition or area of alteration and shall be determined in accordance with Table SPS 302.31-1 or Table 302.31-2

Note: SPS 302 provides for a partial fee refund if a plan action has not been taken within 15 days of receipt of all required information.

Table 302.31-1  
 Plan Review Fees for  
 Buildings Not Located in Municipalities That Perform Inspections as an agent of the Safety and Buildings Division

Area (Square Feet)	Building Plans	HVAC Plans	Fire Alarm System Plans	Fire Suppression System Plans
Less than 2,500	\$300	\$180	\$50	\$50
2,500 - 5,000	350	250	100	100
5,001 - 10,000	600	350	150	150
10,001 - 20,000	800	450	200	200
20,001 - 30,000	1,200	600	250	250
30,001 - 40,000	1,600	900	400	400
40,001 - 50,000	2,100	1,200	550	550
50,001 - 75,000	2,900	1,600	800	800
75,001 - 100,000	3,600	2,200	1,100	1,100
100,001 - 200,000	6,000	2,900	1,400	1,400
200,001 - 300,000	10,500	6,700	3,300	3,300
300,001 - 400,000	15,500	9,800	4,800	4,800
400,001 - 500,000	18,500	12,000	6,300	6,300
Over 500,000	20,000	13,500	7,100	7,100

Table 302.31-2  
 Plan Review Fees for  
 Buildings Located in Municipalities that Perform Inspections as an Agent of the Safety and Buildings Division

This table may be utilized for projects in municipalities that are delegated to perform inspections of the object type(s) that you are submitting as a certified municipality and/or agent of the department. Reduced fees do not apply to state owned buildings. Check our website home page at <http://dsps.wi.gov/sb/SB-CommBldgsDeleMunis.html> , or call 608-266-3151 for the current list.

Area (Square Feet)	<u>Building Plans</u>	HVAC Plans	Fire Alarm System Plans	Fire Suppression System Plans
Less than 2,500	\$250	\$150	\$30	\$ 30
2,501 - 5,000	300	200	60	60
5,001 - 10,000	500	300	100	100
10,001 - 20,000	700	400	150	150
20,001 - 30,000	1,100	500	200	200
30,001 - 40,000	1,400	800	350	350
40,001 - 50,000	1,900	1,100	500	500
50,001 - 75,000	2,600	1,400	700	700
75,001 - 100,000	3,300	2,000	1,000	1,000
100,001 - 200,000	5,400	2,600	1,200	1,200
200,001 - 300,000	9,500	6,100	3,000	3,000
300,001 - 400,000	14,000	8,800	4,400	4,400
400,001 - 500,000	16,700	10,800	5,600	5,600
Over 500,000	18,000	12,100	6,400	6,400

**NOTES:**

- A. **Plan entry fee of \$100.00** shall be submitted with each submittal of plans to the department in addition to the plan review and inspection fees.
- B. A fee reduction may be taken for plans involving **multiple identical buildings** located on the **same site** and **submitted at the same time**: The fees for the submittal of building, heating and ventilation plans for the first building shall be determined in accordance with the appropriate Table 302.31-1 or 302.31-2 on the basis of the total gross area of one building. The fee for each of the remaining identical buildings shall be computed on the basis of an area of less than 2,500 square feet.

## 12. CALCULATION OF FEES

**Determine Project Area:** The area of a floor is the area bounded by the exterior surface of the building walls or the outside face of columns where there is no wall. Area includes all floor levels such as subbasements, basements, ground floors, mezzanines, industrial equipment platforms, balconies, lofts, decks, all stories and all roofed areas including porches and garages, except for cantilevered canopies on the building wall. Use the roof area for free standing canopies. Total project area is the summation of all floor areas that are part of this project. Attach a separate sheet if necessary for the calculations below:

Floor Level (specify)	Length	X	Width	=	Area
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
_____	_____	X	_____	=	_____
Total Project Area				=	_____

**B. Determine Fee Table:** Determine the appropriate fee table based on the project location.

**C. Compute Total Fee**

- **Building Fee** (from table)      [\$\_\_\_\_\_.00] + [No. of Add'l identical Bldgs \_\_\_\_\_ X Min. Fee \$\_\_\_\_\_.00] = \$\_\_\_\_\_.
- **HVAC Fee** (from table)      [\$\_\_\_\_\_.00] + [No. of Add'l identical Bldgs \_\_\_\_\_ X Min. Fee \$\_\_\_\_\_.00] = \$\_\_\_\_\_.
- **Fire Alarm Fee** (from table)      [\$\_\_\_\_\_.00] + [No. of Add'l identical Bldgs \_\_\_\_\_ X Min. Fee \$\_\_\_\_\_.00] = \$\_\_\_\_\_.
- **Fire Suppression Fee** (from table)      [\$\_\_\_\_\_.00] + [No. of Add'l identical Bldgs \_\_\_\_\_ X Min. Fee \$\_\_\_\_\_.00] = \$\_\_\_\_\_.
- **Miscellaneous Fee**      No. of Buildings \_\_\_\_\_ x \$250.00      \$\_\_\_\_\_.
- (plans submitted within 8 months of denial, separate footing/foundation, independent bleacher plans more than 10 feet apart, structural framework, etc)
- **Permission to Start Construction**      No. of Buildings \_\_\_\_\_ X (\$75.00)      \$\_\_\_\_\_.
- **Revision to previously reviewed, but not denied, plans**      No. of Buildings \_\_\_\_\_ X (\$75.00)      \$\_\_\_\_\_.
- (This includes submittal of revised plans, within 30 days, after an additional information/hold action)
- **Additional number of plan sets**      No. of Plan sets in excess of 5 \_\_\_\_\_ X (\$25.00/set)      \$\_\_\_\_\_.
- **Components**      \$\_\_\_\_\_.
- Trusses, precast, metal bldg, joist girders, etc. If submitted with or as a follow up to a current bldg project, fee is only the minimum \$100 submittal fee. If submitted as a stand-alone project or submitted following final inspection of the building, fee is \$250 plus the \$100 submittal fee.
- Other      \$\_\_\_\_\_.
- Submittal Fee (required for each and every separate submittal of choices above)      \$\_\_\_\_\_ **100.00**
- Additional sets of approved plan sets requested after plan approval      No. of plan sets \_\_\_\_\_ X (\$25.00)      \$\_\_\_\_\_.
- Plan approval extension      (\$120.00)      \$\_\_\_\_\_.

<p style="font-size: small; margin: 0;">Make checks payable to Safety and Buildings Division. Mail check and payment voucher to –                  DSPS Fiscal Plans, PO Box 8602, Madison WI 53708-8602</p>	<p><b>Total Amount Due \$</b> _____</p> <p style="text-align: right;">Revenue Code 7648</p>
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If designer wishes to be invoiced, complete box 9d on page 2

**13. Appointment, Scheduling Information, and Plan Submittal Checklist.**

To schedule for other than revisions – do not use this form. Instead you can use S&B's 24-hour web scheduling site: <http://dps.wi.gov/sb/SB-CommBldgsPlanRevSched.html> to reserve an appointment date while you are still working on the plans.

For revision or lighting appointments fax this form to 877-840-9172.

Web scheduling allows you to view the next available appointment in any office and select an office that best fits your timeframe. You will receive a completed application form with an appointment date, transaction ID number, assigned reviewer, and required fees based on what you entered. Scheduled plans must be received in the office of the appointment no later than two working days before the confirmed appointment.

Check our Website: <http://dps.wi.gov/sb/SB-DivPlanReview.html>. You may email technical code questions to [DpsSbBuildingTech@wi.gov](mailto:DpsSbBuildingTech@wi.gov) or fax to 608-283-7403.

<p><b>Madison S&amp;B</b>                  201 W Washington Ave 53703                  PO Box 7162                  Madison WI 53707-7162</p> <p>608-266-3151                  TYY Contact Through Relay</p> <p>Fax (for sending questions or additional info to reviewers)                  608-267-9566</p>	<p><b>Hayward S&amp;B</b>                  10541N Ranch Rd                  Hayward WI 54843</p> <p>715-634-4870</p> <p>Fax (for sending questions or additional info to reviewers)                  715-634-5150</p>	<p><b>LaCrosse Area S&amp;B.</b>                  3824 N Creekside La                  Holmen WI 54636</p> <p>608-785-9334</p> <p>Fax (for sending questions or additional info to reviewers)                  608-785-9330</p>	<p><b>Green Bay S&amp;B</b>                  2331 San Luis Place                  Green Bay, WI 54304</p> <p>920-492-5601</p> <p>Fax (for sending questions or additional info to reviewers)                  920-492-5604</p>	<p><b>Waukesha S&amp;B</b>                  141 NW Barstow St.                  4<sup>th</sup> Floor                  Waukesha WI 53188-3789</p> <p>262-548-8600                  Fax (for sending questions or additional info to reviewers)                  262-548-8614</p>
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**City of Franklin, Wisconsin**  
**Calculations for determining Residential Equivalent Connections (RECs)**  
**For Non-Residential Buildings, Additions and Occupancies**  
**For the year 2013**

The Impact Fee ordinance is intended to impose an Impact fee, in order to regulate the effect of new development on public facilities, and to finance public facilities, the demand for which is generated by new development or any improvements made to existing development. It is the responsibility of the property owner to submit a good faith estimate of the intended water use for the non-residential development. Based on this information, the City will calculate and impose an interim impact fee for development. The City may, anytime within 60 months of the establishment of nonresidential account, recalculate the impact fee based upon the highest actual quarterly water usage by a nonresidential account.

**APPLICANT PROVIDES THIS INFORMATION**

Date:	Tax Key #:
Property owner:	Contact Person:
Business Name:	Telephone #
Location:	Address:
Form Completed By & Telephone # (Please Print)	Use:

**Estimated infrastructure usage caused by the non-residential development (new industrial, commercial or institutional building). If an addition to, or remodeling of an existing building, indicate the change in gallons per day.**

Average Daily Water Use (GPD):	Maximum number of Employees per work shift:
Hours of operation (Total of the Daily Shift's Hours):	
Description of Use of Building or Space:	

<b>FOR DEPARTMENT USE ONLY DO NOT FILL OUT BELOW THIS LINE</b>	
SIC Code Used:(Gallon/Employee Hour)	Calculated By:

**IMPACT FEE TO BE CALCULATED BY CITY STAFF**

<p>Water Usage: _____ Gallons per Day /169 Gallons = _____ * RECs.</p> <p>_____ WATER RECs @ \$1970 = \$ _____</p>	<p>Or</p> <p>_____ Gallons/Employee/Hr (SIC Code) X _____ Employees X _____ Hours Day = _____ /169</p> <p>= _____ * RECs @ \$1970.00 = \$ _____.</p>
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# Notice of Intent To Discharge Non-domestic Wastewater

## ***I. Persons who must submit a Notice of Intent***

A person must submit a *Notice of Intent* before discharging a new non-domestic wastewater to the sewerage system, significantly modifying an existing non-domestic wastewater discharge, or taking possession or control of an existing facility that discharges process wastewater. You must submit a *Notice of Intent* if you are:

- (a) Constructing a new facility that will discharge process wastewater to the sewerage system;
- (b) Changing the physical size or operations at an existing facility to the extent that wastewater volume or content will be substantially changed, including, but not limited to, a change in the annual average daily discharge flow rate of 20% or more;
- (c) Taking possession or control of an existing facility that discharges process wastewater;
- (d) Proposing to discharge contaminated groundwater;
- (e) Commencing or modifying a discharge of hazardous waste that requires reporting according to sec. 11.412, MMSD Rules; or
- (f) Proposing to discharge any other non-domestic wastewater not previously reported to the District.

## ***II. Timing***

The District must receive the *Notice of Intent* at least 60 days before an action listed in Item I. **You may commence discharging only after receiving written approval from the District.**

## ***III. Submitting the Notice of Intent***

Mail or deliver the District's copy of the *Notice of Intent* to:

Milwaukee Metropolitan Sewerage District Attention: Harvey  
Matyas  
260 West Seeboth Street  
Milwaukee, Wisconsin 53204-1446

You may fax the *Notice of Intent* to the District at 414-272-0270.

The municipality in which the discharging the facility is located must also receive a copy of the *Notice of Intent*.

#### **IV. Contact person**

The *Notice of Intent* must identify a contact person, who must be an employee, operator, or owner of the discharging facility. The contact person must be someone with operational responsibilities and a technical knowledge of the processes and equipment at the facility. The contact person is not necessarily the same person who must sign this *Notice of Intent*. If a consultant is preparing this *Notice of Intent*, please identify the consultant on a separate sheet. While a consultant may prepare and submit the *Notice of Intent*, the *Notice of Intent* must still identify someone from the discharging facility as the contact person and someone from the facility must sign the Notice of Intent according to Part VII of this introduction.

#### **V. Identity and concentration of pollutants**

You must provide enough information for the District to identify the pollutants that have a potential to be in the wastewater and to determine whether any pollutant would violate the limits or prohibitions established by secs. 11.202 or 11.203, MMSD Rules.

If you are not currently able to sample the wastewater, then you must use your best engineering judgment to predict the pollutants that may be present. You may base this prediction upon the raw materials, processes, operations, and circumstances that will produce the non-domestic wastewater. You can obtain information regarding potential pollutants from material safety data sheets, equipment vendors, other persons with similar processes, and development documents for any applicable categorical standards.

If you are able to sample the wastewater, then you must submit analytical results with the *Notice of Intent*. You must analyze the wastewater for the pollutants listed in sec. 11 .203(1)(a), MMSD Rules, and for pH. If the wastewater is related to a remedial action at a site of a leaking underground storage tank, then you must analyze the wastewater for the chemicals that the tank contained, in addition to the pollutants listed in sec. 11 .203(1)(a), MMSD Rules. You may exclude pollutants if you have no reasonable expectation that they will be present and if you provide your reasoning to the District. The results must be from samples collected within three months before the submission of the *Notice of Intent*.

Contact the District at 414-225-2164 if you have questions regarding characterizing your wastewater.

#### **VI. Signature**

Someone who satisfies the requirements of secs. 11.401 (2)(c) and 11.417, MMSD Rules, must sign the *Notice of Intent*. Generally, the required person is an officer of a corporation, a partner, or a proprietor. A representative of one of these persons may sign the *Notice of Intent* if the representative has written authorization and the written authorization is submitted to the District.

#### **VII. Fee**

In many cases, paying a fee with this *Notice of Intent* is **NOT** required. However, if the proposed discharge would be for a single, short-term event or if the discharge is unrelated to your water consumption from a public water supply, then you must pay the fee established by the District's *Cost Recovery Procedures Manual*. For 2006, this fee is \$250. You must submit this fee with the *Notice of Intent*. Make checks payable to the Milwaukee Metropolitan Sewerage District. The District will not evaluate a *Notice of Intent* unless this fee is paid. This fee is nonrefundable, even if the District denies permission to discharge.

### **VIII. Applicable wastewater regulations**

Every person who discharges to the sewerage system is subject to Chapter 11, MMSD Rules. In addition to the MMSD Rules, various state or federal regulations may apply. If you have questions regarding the applicable requirements, you may contact the District at either 414-225-2164 or 414-225-2275. Please note, however, that the District will not provide comprehensive engineering advice or legal counsel. You are responsible for obtaining any necessary engineering consultants, legal counsel, or both.

### **IX. Review of proposed wastewater treatment systems**

If you intend to install facilities or equipment to treat wastewater before discharge, then you must submit plans, specifications, and operating procedures to the District, according to sec 11.414, MMSD Rules. You are not required to submit this information with the *Notice of Intent*. However, you must submit this information before the commencement of operation of the treatment facilities or equipment.

In addition, you must submit plans, specifications and operating procedures to the Department of Natural Resources (DNR), according to ch. NR 108, Wis. Adm., Code. You must provide to the District a copy of the approval letter from the DNR before the commencement of discharge. Alternatively, you may provide a copy of a letter from the DNR indicating that your treatment system is exempt from approval requirements. Currently, the DNR prohibits commencing the construction of any wastewater treatment system before receiving approval from the DNR.

### **X. The District's response**

The District will respond to *Notices of Intent* with either a letter of approval, a letter of disapproval, or a request for additional information. The District will require additional information if the District concludes that the proposed discharge requires a wastewater discharge permit, which the District must issue to any facility that is "significant industrial user" according to sec. 11.103, MMSD Rules. Other circumstances may also cause a request for additional information.

The District may request an opportunity to inspect the site of the proposed discharge.

If the District determines that a wastewater discharge permit is necessary, then you must submit a *Baseline Report*, according to sec. 11.402, MMSD rules. This report is mandatory if the proposed discharge will be subject to a categorical standard set forth in 40 CFR 405 to 471 or if the District has classified a facility as a significant industrial user for some other reason.

**You may commence discharging only after receiving either an approval letter or a wastewater discharge permit.**

**XI. Additional instructions and information**

- (a) Please type or print clearly.
- (b) If the form does not allow you to completely explain your circumstances, please attach a cover letter providing more information.
- (c) “SIC” means the standard industrial classification, as set forth in the *Standard Industrial Classification Manual*, as published by the federal Office of Management and Budget.
- (d) For domestic wastewater discharges, you may estimate 2.3 gallons per employee hour.
- (e) Section 11.102, MMSD Rules, provides definitions for several important terms used in the *Notice of Intent*.
- (f) Instead of using the *Notice of Intent* form, you may provide all of the required information in a letter or other format.
- (g) Chapter 11, MMSD Rules, and the District’s *Cost Recovery Procedures Manual* are available from the District’s Record Center (414-272-5100).
- (h) If you have questions regarding the *Notice of Intent*, please contact the District at 414-225-2164.

Thank you for your cooperation

**Notice of Intent**  
**To Discharge Non-domestic Wastewater,**  
**As Required by sec. 11.401, MMSD Rules**

**I. Facility Information**

(a) Facility name

(b) Facility address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(c) Mailing address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(d) Contact person \_\_\_\_\_

Name

\_\_\_\_\_

Title

\_\_\_\_\_

Telephone

(e) Business description

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Flow rates (gallons per day) Existing  
Proposed

Domestic

Non-domestic  
Process

Non-contact  
cooling

Other

(e) Process wastewater discharges (fill in the spaces that apply)

1. Continuous discharge: \_\_\_\_\_ hours per day \_\_\_\_\_ days per week
2. Batch discharge: \_\_\_\_\_ gallons discharged per \_\_\_\_\_ .  
Frequency Time
3. One time discharge: \_\_\_\_\_ gallons discharged over \_\_\_\_\_ days
4. Other (explain the timing and type of discharge)

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(f) List the pollutants potentially present in the wastewater covered by this *Notice of Intent*

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(g) Sample results. If you are able to sample the wastewater covered by this *Notice of Intent*, then attach sample results according to the instructions.

(h) Would the wastewater covered by this *Notice of Intent* be regulated as hazardous waste according to sec 40 CFR 261 if it was not discharged to the sewerage system?

Yes \_\_\_\_\_ No

If yes, contact the District for additional reporting requirements.

(i) Describe any proposed treatment procedures or equipment

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(j) Enclose a drawing of the site where the discharge will occur, This drawing must identify all connections to the sewerage system; the processes, operations, or activities generating wastewater; treatment facilities, and potential sampling locations.

**III. Certification and signature**

*I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.*

---

Signature

Date

---

Printed name and title

# CITY OF FRANKLIN

9229 W. LOOMIS ROAD, FRANKLIN, WI 53132

Phone (414) 425-0084 Fax (414) 425-7513

Website: [www.franklinwi.gov](http://www.franklinwi.gov)

Email Address: [generalinspection@franklinwi.gov](mailto:generalinspection@franklinwi.gov)

**TO: COMMERCIAL BUILDERS, CONTRACTORS AND OWNERS**

## **CITY OF FRANKLIN INSPECTION DEPARTMENT 414-425-0084**

<b>Fred Baumgart</b>	<b>Building Inspector</b>
<b>John Skuhra</b>	<b>First Asst. Bldg. Insp.</b>
<b>Tony Csavoj</b>	<b>Asst. Bldg. Insp.</b>
<b>Steve Froemming</b>	<b>Electrical Insp.</b>
<b>Bob Moehle</b>	<b>Plumbing Insp.</b>

## **CITY OF FRANKLIN FIRE DEPARTMENT 414- 425-1420**

<b>Adam Remington</b>	<b>Fire Chief</b>
<b>Gordon Jepsen</b>	<b>Fire Marshal</b>

**SCOPE:** This list of inspections is intended to assist the owner and the contractors to understand what inspections are required and at what stage of construction to call and schedule inspections for Building, Plumbing, Electrical, HVAC and Fire related stages of construction work.

### **KEY TO COLOR CODED SECTIONS**

<b>BLACK =</b>	<b>Building, Plumbing, Electrical or HVAC Inspections</b>
<b>RED =</b>	<b>Fire Dept. Inspections</b>
<b>BLUE =</b>	<b>Important Reminders</b>

### **SCHEDULING INSPECTIONS:**

All inspections that are made with the Inspection Department must be scheduled **24 hours** before the date of the inspection. **Call the Inspection Department at 414-425-0084 to schedule inspections; the Clerical Staff schedules all Building, Plumbing, Electrical, and HVAC Inspections.**

**The Franklin Fire Department requires a minimum of 48 hours notice prior to the date of inspection. Fire Department inspections are done Monday through Thursday (Contact the Fire Department about inspections needed on Friday). To schedule inspections, call the Fire Department Secretary at 414-425-1420.**

This is a generalized list of Building, Electrical, Plumbing, HVAC, Utility, and Fire inspections required for most commercial, industrial, institutional, and multi-family building projects. Not every inspection that is on this list is required on every job.

Call the [Inspection Department](#) or the [Fire Department](#) if you question whether an inspection is required or applies to your project.

**PLANS AT SITE: ALL Plans approved by the State of Wisconsin Dept. of Safety and Professional Services, City of Franklin Inspection Department, Franklin Fire Department, including plats of survey, site plans, plumbing plans, lighting plans, revisions to approved plans, component plans, (structural steel, pre-cast, trusses, HVAC, fire alarms, sprinklers) and structural engineering, shall remain at the construction site until the issuance of an occupancy permit.**

## LIST OF INSPECTION TYPES

- 1 **FOOTING:** When footing forms are set up and reinforcing is in place, before pouring concrete. [Each footing pour must be inspected.](#)
  - a) Reinforcing steel must be installed, lapped and tied per specifications, with corner bars installed and supported on chairs.
  - b) If footing contains more than 20 feet of rebar, the reinforcing must be used as the grounding electrode conductor. Contact the electrical contractor.
- 2 **FOUNDATION WALLS:**
  - a) **POURED WALL, PRE-POUR INSPECTION:** When foundation and/or wall forms are in place, reinforcing steel is installed, prior to pouring concrete. [Each foundation pour must be inspected.](#)
  - b) **FOUNDATION:** Before backfilling, when concrete block or poured concrete walls are in place, prior to backfilling. Drain tile must be installed, stoned and foundation insulation if required is in place. [Each portion of the foundation to be backfilled must be inspected.](#)
- 3 **ABOVE GRADE WALLS:**
  - a) When wall forms or block walls are in place, reinforcing steel is installed, prior to pouring concrete or grouting. [Each wall pour must be inspected.](#)
- 4 **ONSITE UTILITY LATERALS:**
  - a) **OUTSIDE SEWER, WATER LATERAL, COMBINATION WATER AND FIRE PROTECTION LATERALS AND STORM SEWER LATERALS:** Inspect water and fire protection laterals, and storm sewer while on test, prior to covering work.
    - i) The Plumbing Inspector and Fire Marshal for combination fire/domestic.
    - ii) Underground hydrostatic test for fire main or combination main shall be tested at 200 psi for 2 hours, pressure test and the underground flush must be witnessed by the Fire Department.
  - b) **DEDICATED FIRE PROTECTION LATERALS:** Before covering work. Both the Plumbing Inspector and the Fire Marshal will make this inspection and witness the test at 200 psi for 2 hours, pressure test and the underground flush must be witnessed by the Fire Department.
  - c) **PRIVATE FIRE HYDRANT INSTALLATIONS:** Hydrants shall be inspected by the Fire Department and the Franklin Water Utility, before being put into operation.

### NOTICE TO PLUMBING CONTRACTORS

Some areas of Franklin (portions of South 27<sup>th</sup> Street and West College Avenue) are served by the City of Milwaukee Water Utility. Milwaukee's Water Utility has specific requirements for piping materials that may be used for water laterals. Please contact the City of Milwaukee Water Utility at 414-286-2830 for their specific requirements.

- 5 **OFFSITE UTILITY LATERALS (In an easement or the ROW):**
  - a) **Offsite utilities are inspected by the Franklin Engineering Department, Franklin Water Utility, or consulting engineering firms. Call the Engineering Department at**

**414-425-7510 to arrange inspections.**

**6 STRUCTURAL FRAMING AND ROUGH FRAMING INSPECTIONS:**

a) **STRUCTURAL INSPECTION:** Structural steel, pre-cast concrete beams and columns, steel floor and roof deck, pre-cast concrete floors, pre-cast concrete walls and other components. When the building structural component installation is complete. Inspection will check the structural components as well as the welded and bolted connections. [Plans and engineering specifications for structural components shall be submitted prior to scheduling this inspection.](#)

**7 ROUGH INSPECTIONS:**

- a) **ROUGH PLUMBING:** When waste and vent and water lines are installed, but prior to rough framing inspection. [Tests are required on all plumbing.](#)
- b) **ROUGH ELECTRICAL:** When rough-in of electrical is completed, before rough framing inspection.
- c) **ROUGH CARPENTRY:** After electrical and plumbing has been inspected. Do not cover work or install insulation until rough framing inspection has been approved. [Department of Safety and Professional Services approved Truss plans shall be on site.](#)
- d) **FIRESTOPPING:** Inspection of some of the fire stopping methods and materials may be done at this time. [Fire stopping plans and details shall be on site.](#)
- e) **ROUGH HEATING AND DUCTWORK:** After electrical and plumbing have been inspected. Do not cover work or install insulation until rough framing inspection has been approved.
- f) **ROUGH EXHAUST HOODS AND DUCTWORK**
- g) **KITCHEN EXHAUST HOODS & DUCTWORK:**
- i) Light test on all welded seams, for Type 1 hoods.
  - ii) Duct wrap, for Type 1 Hoods. [Specifications shall be on site for the inspector.](#)
- h) **FIRE ALARM ROUGH: Joint inspection by Fire and Inspection Departments**
- i) **FIRE SUPPRESSION SPRINKLER ROUGH**
- j) **FIRE (FDC) LOCATION INSPECTION: Inspection prior to insulation and drywall.**

**8 UNDER FLOOR SLAB INSPECTIONS:**

- a) **UNDER FLOOR ELECTRICAL:** Inspect before grading floor or pouring floor slab or pouring concrete.
- b) **UNDER FLOOR PLUMBING:** Inspect before grading floor or pouring floor slab or pouring concrete. A test is required on all plumbing.
- c) **UNDER FLOOR DUCTWORK:** Inspection for bedding, pitch, and insulation before covering.

**9 CONCRETE SLABS, SLABS ON GRADE AND FLOORS:**

- a) **FLOOR SLABS:** Gravel/stone, below grade insulation, below slab, foundation perimeter insulation and vapor barrier with seams taped shall be inspected before pouring floor or slab.
- b) **ALTERATIONS AND CUTTING OF FLOOR SLABS:** When slab has been cut for any change or alteration below the slab.

**10 WALL, INWALL AND CEILING SYSTEMS:**

a) **FIRE WALLS, SMOKE WALLS, FIRE BARRIERS:** Where multiple layers of drywall are required as part of the firewall design or where channel is used in conjunction with the drywall installation, the taping, channel of the first layer of drywall shall be inspected by the Building Inspector before subsequent layers of drywall are installed. **Each drywall layer(s) must be inspected.** Wall type and rating must be stenciled on walls when required.

b) **INSULATION & ENERGY:** When insulation and vapor barrier have been installed, before covering or installing drywall.

c) **FIRE ALARMS**

d) **CARBON MONOXIDE DETECTION SYSTEMS**

e) **FIRE SUPPRESSION SPRINKLERS**

11 **PRE-CEILING TILE INSTALLATION INSPECTION:** When electrical, including fixtures, fire sprinklers and piping, fire alarm cabling and HVAC ductwork is installed prior to installing any ceiling tile.

a) **FIRE DEPARTMENT ABOVE CEILING**

i) **Fire suppression sprinklers**

ii) **Fire alarms, smoke alarms**

b) BUILDING INSPECTION ABOVE CEILING

c) ELECTRICAL INSPECTION ABOVE CEILING

d) PLUMBING INSPECTION ABOVE CEILING

12 **DRIVE APPROACH OR CURB RETURNS:** When forms are in place, prior to pouring. Franklin Engineering Department will do the inspection.

13 **PRE – FINAL/OCCUPANCY INSPECTIONS:**

a) **FIRE ALARM:** All fire alarm pull stations, horns, strobes, smoke and carbon monoxide detectors shall be inspected, tested by the Building Inspector and the Fire Marshal.

i) Please have your contractor Pre-Test the alarm system for correct operation before requesting this inspection. **Inspection will be terminated if it is apparent that the system has not been pre-tested by the installer.**

ii) Please have electrical contractor or fire alarm installer present to assist in operation and testing including resetting of the system.

iii) For monitored systems, please contact monitoring company to arrange for testing mode, before testing time and date.

iv) **Fire alarm system inspections will not be scheduled as a portion of the occupancy inspection, call for separate alarm inspection prior to the date of the building final.**

v) Measure sound pressure levels of audible alarms for compliance with approved plans and code standards.

vi) Inspect operation of strobes and verify candela rating of each device for compliance with the approved plans and code standards.

vii) Operation of duct dampers, smoke detectors and for control of HVAC equipment shut down.

viii) Release of fire doors, smoke doors and other hold open devices.

- ix) Pressurization and smoke exhaust systems operation.
  - x) Twenty four (24) hour battery test after passing the tests above.
  - xi) Test of the monitoring system and telephone lines.
  - xii) Provide a printout or a log file of the devices as tested.
- b) **FIRE SPRINKLER TEST AND PRELIMINARY FIRE DEPARTMENT INSPECTION:** Fire sprinklers shall be tested and witnessed prior to putting the system into operation.
- c) **FIRE PUMP TEST:** Prior to putting pumps into operation.
- d) **FIRE SPRINKLER:** Conduct FORWARD FLOW TEST AND BACKFLOW TEST.
- e) **STANDPIPE:** Check Fire Department connections for 2 ½ inch and 1 ½ inch hose connections and pressure reducing valves (PRV) when required.
- f) **KITCHEN HOOD and SUPPRESSION SYSTEM:** Inspection tests suppression system discharge, gas valve, and electrical shut off or device closures.
- g) **EMERGENCY GENERATOR TEST:** The emergency generator and transfer switch must be tested to verify that emergency generator starts and power transfers to emergency power within 10 seconds and all code required emergency lighting is operational. Please have the contractor test the generator and transfer system for correct operation before requesting this inspection.
- h) **EMERGENCY LIGHTING:** The Wisconsin IBC includes requirements for lighting levels for egress path. This inspection needs to be done when it is dark and shall be scheduled a week before the date requested, all inspections are pending staff availability.
- i) Please have your contractor test the EM lighting system for correct operation and lighting levels before requesting this inspection.
  - ii) The Emergency lighting test consists of the following two inspections:
    - (a) **Lighting Level Test:** The inspection is done during the evening when dark. The lighting levels are measured with a light meter to verify that the egress path lighting level meets the minimum code requirement.
    - (b) **Battery Test:** The inspection is done during the day; the power to the emergency lighting is turned off and the lights must operate on battery for a minimum of 90 minutes. **(This inspection is not required when an emergency power source such as a generator is provided.)**
- i) **EXIT LIGHT LOCATIONS:** This inspection may be made at either rough-in stage or at pre-final. To determine that the number of lights, distance between exit lights and locations of illuminated exit signs appear to be correct, the Building Inspector shall make this inspection. Furniture/partitions and other items may require the installation of additional exit lights.
- j) **WATER METER:** Water meter shall be installed following the Plumbing Inspector's final inspection; please contact City of Franklin or Milwaukee Water Utility depending on source of water to schedule the meter installation.
- k) **ELEVATOR AND ELEVATOR SHAFT:** Inspect the elevator shaft to verify that there are no holes or unprotected penetrations in the rated walls, alarms and/or suppression systems are in place and operational.
- l) **FIRE DEPARTMENT ELEVATOR INSPECTION:** To check fire alarm recall and Fire Department manual control, correct car size and elevator is correctly identified as stretcher

accessible.

#### 14 INFORMATION SUBMITTALS (PRIOR TO FINAL INSPECTIONS):

- a) **EASEMENTS AND CERTIFICATIONS:** Including certification of grades for swales, retention and detention ponds, easements for water main, or other utility or improvements.
- b) **ASBUILT PLANS (DIGITAL):** Submit Asbuilt plans to the Inspection Department prior to occupancy. Plans may be in "AutoCAD" or PDF format, PDF format is preferred, include all pages for Building, Plumbing, HVAC, Electrical, Fire Alarms, and Fire suppression sprinklers.
- c) **BALANCING REPORT/CALCULATIONS:** At completion of the HVAC system a balancing report/s shall be reviewed and accepted by the HVAC system designer.
- d) **CERTIFICATION OF FINAL HVAC BALANCING CALCULATIONS:** A written acceptance from the HVAC system designer and or Supervising Professional stating that they have reviewed the balance calculations and that they accept the work as being in compliance with the design or require corrections.
- e) **FIRE DEPARTMENT ASBUILT PLANS:** Asbuilt plans must be received by the Fire Department a minimum of 72 hours before the date of the inspection (1 paper copy only).
- f) **DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES COMPLETION STATEMENT:** One copy of the form, sent to both the City and the State of Wisconsin Department of Safety and Professional Services.
- g) **DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES ELEVATOR INSPECTION CERTIFICATE:** Inspection and certificate must be done and in place prior to placing elevator/s in use.
- h) **CERTIFICATION OF GRADES FOR RETENTION/DETENTION PONDS:** Submit to the Franklin Engineering Department before occupancy.

#### 15 PRELIMINARY FINAL INSPECTIONS, ALL TRADES: The owner or contractor may request a preliminary occupancy inspection. Construction shall be sufficiently close to being complete to warrant this inspection. The contractor will be given a list of items not completed or not in compliance with code. These items shall be corrected prior to requesting the occupancy inspection. **PRELIMINARY FINAL INSPECTIONS ARE ONLY DONE WITH THE APPROVAL OF THE BUILDING INSPECTOR OR FIRE CHIEF.**

#### 16 FINAL INSPECTIONS:

- a) **ELECTRICAL FINAL:** When all electrical wiring is finished and fixtures have been installed.
- b) **PLUMBING FINAL:** When all waste and vent and water piping and plumbing fixtures have been installed.
- c) **HVAC EQUIPMENT AND DUCTWORK:** Inspection of equipment, ductwork fire dampers, smoke dampers and control dampers. Test ductwork, smoke detectors, fire alarms for HVAC equipment shut down.
- d) **FIRE DEPARTMENT FINAL**
- e) **PLANNING DEPARTMENT FINAL:** Verify that construction corresponds to the approved plans for landscaping, parking and building design.
- f) **ENGINEERING DEPARTMENT FINAL:** Verify that grading, utility installation, driveways, curbs,

pavement, and public improvements have been constructed per the approved plans.

**g) BUILDING FINAL or OCCUPANCY:** When building is complete and the drive approach and watermeter are installed. When all of the building life safety and fire protection items have been completed and inspected.

**h) COMPLETION STATEMENTS:** The Designer, Architect, or Engineer's completion statements shall be submitted for each of the following plan submittals.

(1) Building construction

(2) HVAC

(3) Lighting

### **NOTICE TO CONTRACTORS AND OWNERS:**

The provision to charge for reinspection fees is included in the Franklin Building Code. Please verify that your construction work is complete and ready for the inspection or reinspection you are requesting. Reinspection fees will be charged after the initial inspection and one reinspection of each inspection category. When work is not complete and ready for inspection or when the corrections have not been made, a reinspection fee will be assessed. Reinspection fees must be paid before an occupancy permit can be issued.

**FRANKLIN FIRE DEPARTMENT REQUIREMENTS  
FOR  
COMMERCIAL CONSTRUCTION**

1. Sprinkler and fire alarm plans and revisions must be submitted to the Fire Department for review and approval **before** the installation can start.
2. Fire Alarm and Sprinkler work may not start until plans have been reviewed and conditionally approved by the Fire Department.
3. The Fire Chief must approve location of the Fire Department Connection (FDC). The FDC must be within 50 feet of a fire hydrant.
4. Underground hydrostatic test for fire main or combination main shall be tested at 200# for 2 hours, pressure test and the underground flush must be witnessed by the Fire Department.
5. A rough inspection of the sprinkler installation is required before insulation or drywall is installed. Insulation and drywall can only be installed after they are approved by the Building Inspector.
6. A hydrostatic test of the sprinkler pipe and heads is required. The test is 2 hours in duration at a pressure of 200#.
7. Back flow, forward flow, and sprinkler riser call out must pass acceptance testing before occupancy is granted.
8. A 10" Bell and Strobe must be installed at or above the FDC.
9. The fire alarm system including pull stations, smoke detectors, carbon monoxide detectors, strobes, the system monitoring source and audible alarm, must be tested and approved by the Fire Department before occupancy.
10. A Knox Box and keys for the building and riser room are required. The location is to be approved by the Fire Chief or the Fire Inspector.
11. Burning of building debris is **NOT** allowed on the construction site.