

**BUILDING INSPECTOR  
SAFEbuilt**

**Inspection request must be received by 4 pm, for possible next business day inspection**  
*Next day inspections are not guaranteed*  
**For Inspections call 262-420-4732 or  
WInspections@safebuilt.com**

**PERMIT NO:** \_\_\_\_\_  
**PROPERTY TYPE:** \_\_\_\_\_  
**OCCUPANCY TYPE:** \_\_\_\_\_  
**SQUARE FOOTAGE:** \_\_\_\_\_  
**ESTIMATED COST:** \_\_\_\_\_  
**TAX KEY NO:** \_\_\_\_\_

The undersigned hereby applies for a permit to do the work herein described and hereby agrees that all work will be done in accordance with all the laws of the State of Wisconsin and all the ordinances.

**JOB ADDRESS:** \_\_\_\_\_

**OWNER NAME:** \_\_\_\_\_ **OWNER PHONE:** \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ **LICENSE #:** \_\_\_\_\_

**ADDRESS:** (STREET, CITY AND ZIP CODE) \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**WORK CONSISTS OF:**

- New Building
- Addition
- Accessory Building
- Roofing/Siding/Fence
- Alteration/Repair
- Deck/Pool
- Electrical
- Plumbing
- HVAC
- Other

**COMMENTS/ADDITIONAL CONTRACTORS /WORK DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CK#** \_\_\_\_\_

**FROM** \_\_\_\_\_

**RECEIVED** \_\_\_\_\_

**APPLICANT'S SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**FEES:**

**Building** \_\_\_\_\_

**Electric** \_\_\_\_\_

**Plumbing** \_\_\_\_\_

**HVAC** \_\_\_\_\_

**Zoning** \_\_\_\_\_

**Total** \_\_\_\_\_

**INSPECTOR'S SIGNATURE:** \_\_\_\_\_

**CERTIFICATION NUMBER** \_\_\_\_\_

**DATE:** \_\_\_\_\_