



Multi Family/Commercial Permit Application

Permit Number: _____

Parcel Number: _____

Owner: _____ Email: _____

Address: _____ Phone Number: _____ Zoning District: _____

- New Structure
- Addition
- Exterior Remodel
- Interior Remodel
- Raze
- Misc _____

Project Description: _____

Project Dimensions: _____ Square Footage: _____ Estimated Value \$ _____

Set Backs: Left: _____ Right: _____ Front: _____ Rear: _____

General Contractor: _____ Phone: _____

Address: _____ License: _____

Job Site Manager/Expeditor: _____ Phone: _____

Town Board Approval Date: _____

Conditions of approval: _____

Wisconsin Dept. of Commerce review/approval date and ID: _____

The undersigned hereby applies for a building permit for the project described above in conjunction with the plans and specifications submitted with this application. The applicant agrees that all work is to be done according to these plans and specifications in compliance with Town of Lawrence Zoning Ordinances, applicable building codes, fire codes, and accessibility requirements set forth by the State of Wisconsin.

Citations will be issued and fines assessed to any contractor in violation of town ordinances. These fines must be paid before any red tag is removed and construction resumes.

Contractors must schedule inspections with the state commercial inspector. Records of all inspections must be filed with the local building inspector prior to occupancy. Construction sites must be open to inspection by state, local inspectors and fire department and public utility officials. All building trade contractors must be licensed and/or registered with the State of Wisconsin, Department of Commerce. Only projects listed on this application are permitted. Permits expire 12 months after date of issuance.

Sub Contractor Information:

Excavating Contractor: _____ Phone: _____

Address: _____ License: _____

Building Contractor: _____ Phone: _____

Address: _____ License: _____

Electrical Contractor: _____ Phone: _____

Address: _____ License: _____

Plumbing Contractor: _____ Phone: _____

Address: _____ License: _____

HVAC Contractor: _____ Phone: _____

Address: _____ License: _____

Other: _____ Phone: _____

Address: _____ License: _____

Erosion control measures must be maintained throughout project and until vegetation is stabilized.

ON-SITE BURNING OF BUILDING MATERIALS IS NOT ALLOWED IN THE TOWN OF LAWRENCE.

Applicant Signature: _____ Date: _____

Fees: _____ Check # _____

Inspector Signature: _____ Date: _____