APPLICATION FOR BUILDING PERMIT

TOWN OF HOLLAND, SHEBOYGAN COUNTY

W3005 COUNTY ROAD G, CEDAR GROVE, WI 53013

SEND PERMIT APPLICATIONS AND FEES PAID BY CHECK MADE PAYABLE TO "TOWN OF HOLLAND" TO:

TOWN OF HOLLAND BUILDING INSPECTOR, 50 HICKORY DRIVE, CEDAR GROVE, WI 53013

LOCATION OF CONSTRU	CTION/IMPROVEMENTS/REPAIF	RS:			
OWNER(S):		(OWNER PHONE #:		
OWNER MAILING ADDR	ESS:				
APPLICANT NAME AND F	PHONE # (IF DIFFERENT THAN O	WNER):			
CONTRACTOR:		COI	CONTRACTOR PHONE #:		
CONTRACTOR MAILING	ADDRESS:				
PROPERTY AND BUILD	DING INFORMATION LOT SIZE	: FEET WIDE BY	FEET DEEP or	acres	
DESCRIBE WORK TO BE F	PERFORMED (examples: new co	nstruction, repair, window/sidin	g/roof replacement, remo	deling/alterations)	
APPROXIMATE VALUE O	F CONSTRUCTION:				
NEW STRUCTURES OR	ADDITIONS TO STRUCTURE	S (GARAGES, ACCESSORY STI	RUCTURES, SHEDS, ADD	DITIONS)	
SIZE: FT x	FT HEIGHT: F	T ZONING:	-		
SETBACKS FROM PROPE	RTY LINES: STREET FT	. REAR FT. SIDE	FT. SIDE F	Т.	
the descriptions herein set Holland Ordinances and the Holland. The privilege as gr	forth in this statement; and it is fur e State Building Code of Wisconsin anted above is granted only on the	bove described, and hereby agrees t orther agreed to construct, alter, reparand to obey any and all lawful order condition that by the acceptance or sons or property caused by and arisi	air and install in strict complians rs of the inspector of building f the privilege, the said under	ance with Town of s of the Town of signed, shall become	
SIGNATURE OF APPLICANT:			DATE:		
permit shall expire two The Building Inspector	years after the date of issuance may consider granting a one-ye	from the date of issuance unles if the structure for which the pe ar extension to either of these ex permit before commencing or re	rmit is issued is not substa xpiration time periods. If t	antially completed. he permit expires,	
BUILDING PERMIT ISS	UANCE OR DENIAL (TO BE C	OMPLETED BY TOWN BUILDI	NG INSPECTOR ONLY):		
		BOVE DESCRIBED, IN ACCORDANCE VN BOARD OF APPEALS IS HEREBY G		HE TOWN OF	
FEE RECEIVED:	PERMIT NO	SIGNATURE OF ISSUING O	FFICIAL:		
THIS BOX SHOULD		AIT ALLOWED FOLLOWING CONI	DITIONAL USE PERMIT APP	ROVAL BY THE	
DENIED - PERMISS	SION FOR THE CONSTRUCTION A	ABOVE IS DENIED FOR THE FOLLO	DWING REASON(S):		

TOWN OF HOLLAND, SHEBOYGAN COUNTY W3005 COUNTY ROAD G, CEDAR GROVE, WI 53013

Cautionary Statement to Owners Obtaining Building Permits

101.65(Ir) of 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 2-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.

SIGNATURE OF APPLICANT: _____ DATE: _____ DATE: _____

FOR ASSISTANCE WITH THIS APPLICATION OR FOR QUESTIONS ABOUT ORDINANCES AS THEY RELATE TO **REQUIRED BUILDING PERMITS, PLEASE CONTACT THE TOWN OFFICE:** 920-668-6625 OR CLERK-TREASURER@HOLLANDWI.GOV