

Application for Waiver of Specific Code Sections of the Uniform Dwelling Code (UDC) for One and Two Family Dwellings Based on Religious Beliefs

-Complete all pages-

NOTE: This form is authorized by Wis. Stat. § 101.648. Completion of this form is voluntary and any personal information you provide may be used for purposes unrelated to this form. [Wis. Stat. § 15.04(1)(m).]

Property Information	Owner Information	_					
Number and Street	Name						
Zip	Address						
County of City Village Town	City, State, Zip						
City Village Town Of:	Contact Person:						
	Telephone Number:						
Check applicable boxes for requested Uniform Dwelling Code waivers. Carbon Monoxide Detection (Attach additional materials as necessary.)							
☐ Smoke Detection (Attach additional materials as necessary.)						
 *Plumbing (Attach additional materials as necessary.) *Waiver applies only to plumbing installed within a one- or two-family dwelling. Wis. Admin. Code § SPS 382.38 requires that domestic wastewater be discharged to a municipal sewage system or a code compliant privately-owned wastewater treatment system (POWTS). 							
☐ Electrical (Attach additional materials as necessary.)							
Verification by Owner:							
I affirm that <u>all</u> the following statements are true:							
My religious beliefs and the established tenets or teachings of the religious sect of which I am a member conflict with one or more dwelling construction standards.							
The dwelling for which this waiver is requested will be used solely as a primary residence for myself or the members of my household.							
This waiver is requested based upon the long-established tenets and teachings of the religious sect of which I am a member and this sect did not establish these tenets and teachings solely to avoid compliance with dwelling construction standards.							
☐ I agree to modify this dwelling for which this waiver is requested to comply with the dwelling construction standards if I cease to adhere to the tenets and teachings of the religious sect of which I am a member and upon which this waiver is requested.							
Owner's Signature		Date					

Muni	icipal Official App	roval:						
	☐ City	☐ Village	☐ Town	☐ County				
	Of:							
The p	political subdivisi	on determines that al	l the following a	are true:				
	The political subdiviorm are untrue.	sion has no reason to b	pelieve that the s	statements provided	d by the owner on the	waiver application		
	The political subdivision is satisfied that the waiver will not result in an unreasonable risk of harm to public health or safety.							
□ T	his waiver specifie	s those dwelling constr	uction standards	with which the ow	ner is not required to o	omply.		
The r	requested waiver	is hereby:						
□ A	Approved							
		Denial (If denial action i isconsin, Industry Servi ia email.						
Printe	ed Name & Title							
					P.,			
Munio	cipal Official Signat	iure			Date			
Com	ments/Findings:							
State	Review: (Only red	quired if application der	nial is recommen	ded by municipality	v.)			
	Approved			, , ,	, ,			
	Denied (If denial below.)	action is taken by the D	Department of Sa	afety & Professiona	ıl Services, please indi	cate reasoning		
Printe	ed Name & Title							
State	Official's Signature	е			Date			
Com	ments/Findings:							