Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63(1), 101.82(1) and 145.02(2)(b)	Wisconsin Uniform Camping Permit Application The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m)]	Application No.
		Parcel No.

PERMIT REQUESTED ☐ Construction ☐ HVAC ☐ Electric ☐ Plumbing ☐ Other:

Owner's Name	Mailing Address			Tel.
Contractor Name & Type	Lic/Cert#	Exp Date	Mailing Address	Telephone & Email
HVAC				
Electrical Contractor				
Electrical Master Electrician				
Plumbing				

PROJECT LOCATION Lot area _____ Sq.ft. ☐ Town ☐ Village ☐ City of _____ ____ 1/4, ____ 1/4, of Section ____, T ____ N, R ____ E/W

Building Address	County	Campground Name	Lot No.	Block No.

1. PROJECT	3. CONST. TYPE	6. WALLS	8. HVAC EQUIP.	11. ENERGY SOURCE

1. PROJECT
☐ New ☐ Change of Use
☐ Alteration ☐ Other
☐ Addition

3. CONST. TYPE
☐ Site Built
☐ Other:

6. WALLS
☐ Wood Frame
☐ Steel
☐ ICF
☐ Timber/Pole
☐ Other:

8. HVAC EQUIP.
☐ Furnace
☐ Radiant Basebd
☐ Heat Pump
☐ Boiler
☐ Central AC
☐ Fireplace
☐ Other
☐ None

11. ENERGY SOURCE

Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo
Space Htg	☐	☐	☐	☐	☐	☐
Water Htg	☐	☐	☐	☐	☐	☐

2. AREA INVOLVED (sq ft)

	Camping Unit
Living Area	
Deck/ Porch	
Totals	

4. STORIES
☐ 1-Story
☐ 2-Story
☐ Other

5. ELECTRIC
Entrance Panel
Amps: _____
☐ Underground
☐ Overhead

7. USE
☐ Seasonal
☐ Other:

9. SEWER
☐ Municipal
☐ Sanitary Permit
☐ Transfer Tank

10. WATER
☐ Municipal
☐ On-Site Well

12. EST. BUILDING COST w/o LAND
$

I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

☐ **I vouch that I am or will be an owner occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the second page of this form.**

APPLICANT (Print:) _____ **Sign:** _____ **DATE** _____

APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. ☐ **See attached for conditions of approval.**

ISSUING JURISDICTION ☐ Town ☐ Village ☐ City ☐ County ☐ State

State-Contracted Inspection Agency#: _____

Municipality Number of Dwelling Location

FEES:	PERMIT(S) ISSUED	PERMIT ISSUED BY:
Plan Review $ Inspection $ Wis. Insignia $ Other $ Total $	☐ Construction ☐ HVAC ☐ Electrical ☐ Plumbing ☐ Other	Name _____ Date _____ Tel. _____ Cert No. _____

9490IS (05/18)