

## Building Permit Application Commercial New Buildings - Additions - Alterations

**LOCATION** \_\_\_\_\_ **PERMIT #** PLY

**Owner** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Parcel # \_\_\_\_\_ Zoning \_\_\_\_\_

**Contractor** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

License # \_\_\_\_\_ Contact Person \_\_\_\_\_

### PROJECT DESCRIPTION

Description of Project \_\_\_\_\_

Project Cost \_\_\_\_\_ Project Start Date \_\_\_\_\_

Building Permit Fee Schedule			
<b>Building Permit</b>			
\$4 per \$1000 of the project cost		x \$ 4.00	
\$200 Base Fee			\$ 200
<b>New Buildings and Additions must include</b>			
Escrow - New Construction		\$ 1,000	
Land Use - 1/10th of 1% of the value	value x	.001	
<b>TOTAL</b>			
Additional Permits May be Required			
Sheboygan County - Shoreland/Floodplain/Sanitary/383.25			
Zoning change or Variance from the Town of Plymouth			

**Return Application and Check to:**  
 Town of Plymouth

**Return Application and Check to:**  
 Town of Plymouth  
 120 Suhrke Road  
 Plymouth, WI 53073

**For Inspections call:**  
 Brian Noe at 920-420-4796

**Size of Building:**

Width: \_\_\_\_\_ Length: \_\_\_\_\_ Height: \_\_\_\_\_

**Setbacks for Property Lines:**

Center of Road: \_\_\_\_\_ft. Rear: \_\_\_\_\_ft. Side: \_\_\_\_\_ft. Side: \_\_\_\_\_ft.

\* Provide a copy of the State approval letter along with plans, site drawing, including measurements and distances, of the property including, but not limited to size and location of existing buildings and proposed changes or additions.

**It is the Applicant's responsibility to know where the lot lines are.**

**PLAN AHEAD ...**

For new buildings, additions, garages, storage sheds or any other type of outbuilding you are required to have Sheboygan County Planning approval first before the Town can issue any building permits. Their phone number is 920-459-3060.

**Permit Fees will double if work is started before the Town of Plymouth has issued a permit.**

For Office Use Only

ToPly-22-23 rev. 9/22      Date Received \_\_\_\_\_      Paid \$ \_\_\_\_\_      Check # \_\_\_\_\_      Cash \_\_\_\_\_

TOWN OF PLYMOUTH

120 Suhrke Rd Plymouth, WI 53073 920-893-5713 clerk@townofplymouth.wi.gov

LOCATION \_\_\_\_\_

PERMIT # \_\_\_\_\_

**Cautionary Statement to Owners Obtaining Building Permits**

101.65(lr) of the 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 two- family dwelling code 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.

You are hereby advised that owner, as defined in 101.01(2)e of Wisconsin State Statutes is responsible for all code requirements not specifically cited herein.

The applicant(Property Owner or Contractor) agrees to comply with the Wisconsin Uniform Dwelling Code, Wisconsin Enrolled Commercial Building Code, and all other applicable codes and municipal ordinances and with the conditions of this permit. The Applicant understands that the issuance of the permit creates no legal liability, express or implied, on the Inspection Agency or municipality and certifies that the information is accurate. The Applicant agrees to allow the building inspection and assessing to access the property for the inspection of this permit. Applicant is responsible for calling and scheduling all inspections to close out the permit once work is complete.

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608) 261-6876 or go to the Wisconsin Department of

Please make sure the application is filled out completely. Incomplete application will cause delays.

I, hereby, certify that all of the supplied information and attachments submitted are true and correct to the best of my knowledge and belief. I agree to the terms of this permit application.

**Permit Fees will double if work is started before the Town of Plymouth has issued a permit.**

Signature of Property Owner \_\_\_\_\_ Date \_\_\_\_\_

or

Signature of Contractor \_\_\_\_\_ Date \_\_\_\_\_

Building permits are good for one (1) year. Should applicants wish to renew such building permit at the end of one (1) year, applicant must make a new application and pay the application fee. All application fees are non-refundable.

Office Use Only

Approved  Denied  \_\_\_\_\_ Date \_\_\_\_\_

Notes, Conditions, Restrictions \_\_\_\_\_

Administrator  
Signature \_\_\_\_\_

Building Inspector  
Signature \_\_\_\_\_

For Office Use Only

ToPly-22-23 rev. 9/22 Date Received \_\_\_\_\_ Paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_