Town of Belgium Building Department c/o Roger Kison 610 11th Avenue Grafton, WI 53024 414-333-4511

DATE RECEIVED	
PERMIT NUMBER	
TAX KEY NUMBER	
ZONING	

BUILDING PERMIT APPLICATION

**Processing of permits is usually five (5) working days, but at peak construction times processing may take longer.

OWNER'S NAME:						
SITE ADDRESS:						
CITY, STATE, ZIP CODE						
PHONE NUMBER:			CH	CHECK IF OWNER IS CONTRACTOR		
EMAIL ADDRESS:						
PERMIT FOR:						
CONTRACTOR:						
ADDRESS:						
CITY, STATE, ZIP CODE						
PHONE NUMBER:						
CONTRACTORS EMAIL ADDRESS:						
Dwelling Contractor's Registration	Numb	oer:				
Dwelling Contractor's Qualifier Nu	ımber:					
PLEASE CHECK PROJECT TYPE						
New Construction*		Alteration (s)		Accessory Building		
Deck*		Pool/Spa				
Razing						
Building Size		Estimated Cost:		Other:		

PLEASE HAVE ALL PAPERWORK SUBMITTED TO:
BUILDING INSPECTOR ROGER KISON
610 11TH AVENUE
GRAFTON, WI 53024

*ITEMS WHICH MUST ACCOMPANY THIS APPLICATION:

2 SETS OF PLANS - RESIDENTIAL \underline{OR} 2 SETS OF PLANS - COMMERCIAL 1 PLAT SURVEYS WITH STRUCTURE PLACEMENT

THIS PERMIT ISSUED by the Building Inspectors Office of the Town of Belgium to construct, erect, alter or install as above described. The work must be done in accordance with the description more fully described in the specifications and plans herewith filed and in strict compliance with the Building Ordinances of the Town of Belgium and the State Building Code. All lawful orders of the Building Inspector, made or issued by virtue of the provisions of said ordinances must be obeyed. Permits are valid for one year from date of issuance and payment of building permit. ALL WORK MUST BE INSPECTED BY THE BUILDING INSPECTOR.

CALL RK INSPECTIONS (ROGER KISON) AT 414-333-4511 FOR INSPECTIONS AND QUESTIONS.

SIGNATURE	DATE	REV 02/21