



RESIDENTIAL BUILDING PERMIT INFORMATION

This is a packet of Building, Electrical, Plumbing, and HVAC permit applications you **must** complete to obtain the permits necessary to remodel or add to your single family home or build a garage. You will not need all of the forms in this packet depending on who is performing the work.

The **Project Permits Application** (the top form) must be completed for all projects. Fill out the form as well as you can and leave blank any areas you do not understand. Staff can help complete the form when you submit the packet for review.

The **Cautionary Statement** (the 2nd form) must be signed and dated if the homeowner is acting as the general contractor or doing any work on the project.

There are two Electrical permit applications (the 3rd & 4th form); one is the **Licensed Electrical Contractor's** permit form and the other is the **Homeowner's Electrical** permit form. If you are using an electrical contractor, please have the contractor fill out this permit and return it to you to submit with the application packet. If you own and live in the house and plan on doing the electrical work yourself, please contact a City electrical inspector at 920-448-3300 before filling out the **Homeowner's Electrical** permit and submit it with the application packet.

The 5th & 6th forms are the **Licensed Plumbing Contractor's** and the **Homeowner's Plumbing** permit forms. Like the electrical permits, if you are hiring a plumbing contractor he must fill out the permit and return it to you. If you, as the owner and occupant, are doing the plumbing work, complete the Homeowner's Plumbing permit form and submit it with the application packet. Contact a City plumbing inspector (920-448-3300) if you have any questions.

The 7th & 8th forms are the **Licensed Heating Contractor's** and the **Homeowner's Heating** permit forms. Again, if using a licensed contractor he must fill the form out and return it to you. If you, as the owner and occupant, are doing the HVAC work, complete the Homeowner's Heating permit form and submit it with the application packet. Contact a City HVAC inspector (920-448-3300) if you have any questions.

You will only need electrical, plumbing, or HVAC permits if that type of work is associated with your project. If you are not doing electrical, plumbing, or HVAC work you will not need those permits.

You may also need to submit building, electrical, plumbing, and HVAC plans when you bring the permit package in. If you are doing work outside the house (addition, new garage, etc.) a site plan may be required. Please tell us the scope of your project when you pick up the permit packet and we will be able to explain what information to submit.

The total permit packet at the time of submittal must contain the Project Permits Application, the Cautionary Statement, any plans required, and an electrical, plumbing, and HVAC permit if that work is being done. **All forms must be filled out and signed prior to issuance of permits.**

CITY OF GREEN BAY

PROJECT PERMITS APPLICATION

Planning Dept-Inspection Division 100 N. Jefferson St Green Bay, WI 54301 ph.448-3300 fax 448-3117 www.greenbaywi.gov

APPLICANT PLEASE FILL IN THE BOLDED AREAS THAT APPLY

Project Address	Parcel #	Project #
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Property Owner		Contractor	
Name		Name	
Company (if applies)		Company	
Address		Address	
City, State, Zip		City, State, Zip	
Phone No./Cell No.	Fax No. (if applies)	Phone No./Cell No.	Fax No.

Current Land Use, Flood Plain & Zoning (check which applies)
 Land Use: Vacant Lot 1-Family 2-Family Multi-Family-# of units____, Commercial (describe) _____
 Zoning: R-1 R-2 R-3 RR OR NC D C-1 C-2 C-3 LI GI BP PI CON TND
 Flood Plain: Yes Base Flood Elevation (BFE)_____ No

Project Scope: New Addition Alteration Repair Move Raze (demolish) Change-of-use
 Height:_____ Area: Finished_____ Unfinished_____ Total Bldg:_____

Description of Project ↓:	Estimated Cost of Construction \$ _____
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Plan Approvals

<input type="checkbox"/> PLG Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____	<input type="checkbox"/> Erosion Control # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____
<input type="checkbox"/> SWR Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____	<input type="checkbox"/> Building Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____
	<input type="checkbox"/> HVAC Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____
	<input type="checkbox"/> Site Plan # _____ \$ _____

Contractors (UDC Numbers Required): DCC # _____ DCQ # _____

<input type="checkbox"/> BLDG	Bldg Fee \$
<input type="checkbox"/> ELEC –	Elec Fee \$
<input type="checkbox"/> HVAC –	Hvac Fee \$
<input type="checkbox"/> PLBG – _____ # of Fixtures	Plbg Fee \$
<input type="checkbox"/> SWRS – <input type="checkbox"/> Water <input type="checkbox"/> Storm <input type="checkbox"/> Sanitary	Swrs Fee \$
<input type="checkbox"/> CERTIFICATE OF OCCUPANCY	C.O. \$
<input type="checkbox"/> Additional Permits (Sprinklers #_____/Curb Cut, Flood Plain, Erosion Control, Temp. Occupancy, Etc) (Please List)	Addl. Fee \$
<input type="checkbox"/> Double Fee Permit [s.15.07(b)] If application for a building permit has not been obtained prior to commencement of the job, applicable permit fee shall be doubled.	Double Fee \$

Application Signature The applicant certifies that information submitted, herein, is accurate; agrees to comply with the Wis. Admin. Code, Municipal Ord., and with the conditions of this permit; and understands that permit issuance creates no legal liability, expressed or implied on the _____ or Municipality.

Signature of Applicant _____	Date _____		
Review By _____	Cred. No. _____		
Class Code	Census	Receipt No.	Total Fee

Copies To: WHITE/Assessor CANARY/File PINK/Applicant Dist # _____ Check _____

Call (920) 448-3300 for required inspections between the hours of 8 a.m. to 4:30 p.m. Monday through Friday! Call during business hours to get on the next business day's schedule.

→ FINAL INSPECTIONS ARE REQUIRED FOR ALL PROJECTS ←



COMMUNITY SERVICES AGENCY
Inspection Division
100 N. Jefferson Street, Room 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 – fax
inspmail@greenbaywi.gov

**CAUTIONARY STATEMENT
TO PROPERTY OWNERS OBTAINING
BUILDING PERMITS**

101.65(1r) 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 arise out of the work performed under the building permit or that is caused by any negligence of 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 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 negligence by the contractor that occurs in connection with the work performed under the building permit.

Owner Signature

Date

White – Owner/Agent

Pink – Office File



www.greenbaywi.gov

LICENSED CONTRACTOR ELECTRICAL PERMIT

COMMUNITY SERVICES AGENCY
Inspection Division
100 N. Jefferson Street, Rm. 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 - fax
inspmail@greenbaywi.gov

Project Address: _____
Owner: _____ Owner's Phone #: _____
Electrical Contractor: _____
Electrical Contractor's Email: _____
Electrical Contractor's Phone #: _____ Cell #: _____
Value of work: \$ _____

This section for City use only	
Project #:	_____
Permit Code:	_____
Permit Fee:	_____
Parcel #:	_____
Receipt #:	_____
Date:	_____

OCCUPANCY

- Single-Family Commercial Educational Multi-Family Number of Units _____
 Two-Family Manufacturing Other _____

NATURE OF WORK

- Alteration Repairs Addition Hot tub/spa Swimming Pool
 Remodeling Sign Detached Garage Other _____

JOB DESCRIPTION

CONTRACTOR STATEMENT: I hereby certify that the above wiring upon completion will be in compliance with the applicable federal, state, local electrical codes and utility service rules.

“ENERGIZING THE DESCRIBED WIRING WILL IN NO WAY CREATE A HAZARD”

State of WI Electrical Contractor Certification # _____ **&** WI Master Certification # _____
(REQUIRED) (REQUIRED)

Signature (Master Electrician Responsible For Work)

Date

INSPECTOR STATEMENT: I hereby certify the work completed as of date signed complies with applicable codes.

Inspector Signature

Date

- Check box for Online Payment
 Phone _____ Fax _____ Email _____
Choose one of the above to receive notification of project number and permit fee which is required to make payment online.



HOMEOWNER'S APPLICATION FOR ELECTRICAL PERMIT

**COMMUNITY SERVICES
AGENCY**
Inspection Division
 100 N. Jefferson Street, Rm. 608
 Green Bay, WI 54301
 (920) 448-3300 - phone
 (920) 448-3117 - fax
inspmail@greenbaywi.gov

This section for City use only

Project #: _____

Permit Code: _____

Permit Fee: _____

Parcel #: _____

Receipt #: _____

Date: _____

Name: _____

Address: _____

Phone #: _____

Email: _____

Check one: Addition to existing building Swimming pool
 Detached garage Other _____

Provide a sketch of the work you intend to do that shows the location of all electrical outlets (i.e. switches, receptacles, lights, etc.)

Briefly describe the electrical work you intend to do:

What type of wiring method(s) do you intend to use (i.e. Romex, EMT, PVC, direct buried cable)?

In the left column, state the size wire you intend to use and, in the corresponding column on the right, state the size over current device you intend to use to protect that wire:

Wire Size & Type	Over current device size
_____	_____
_____	_____

I am the sole owner and occupy the single-family dwelling at the above address and hereby assume all responsibility, liability, and further bind myself and my heirs for any and all damage to property and/or person that may result by not properly installing any electrical work at this address.

NOTE: Duplexes, condos and other similar dwelling units, which are physically attached to other dwelling units, are not single-family dwellings. The City electrical code allows homeowners to do wiring in existing single-family dwellings only.

Before insulating or covering any walls containing any wiring, call the Inspection Division at (920) 448-3300 for a rough-in inspection. At that time, all grounding splices should be made up permanently. When the job is completed, call for a final inspection prior to occupancy.

Application approved by: _____ Signed: _____

_____ Date: _____
 Electrical Inspector



LICENSED CONTRACTOR PLUMBING PERMIT

COMMUNITY SERVICES AGENCY
Inspection Division
 100 N. Jefferson St., Rm. 608
 Green Bay, WI 54301
 (920) 448-3300 - phone
 (920) 448-3117 - fax
inspmail@greenbaywi.gov

Address: _____

Owner: _____ Value of Work: \$ _____

Name of Plumbing Contractor: _____ Phone # _____

Plumbing Contractor Email: _____

This section for City use only

Project #: _____

Permit Fee: _____

Parcel #: _____

Receipt #: _____

Date: _____

I hereby make application for a permit for the following described sewer/plumbing work at the above location.

Master Plumber

Signed: _____ Credential # _____

FIXTURES ROUGHED IN FOR AND/OR INSTALLED (please circle and indicate the number of fixtures)

Sinks	Hot water tanks	Soda fountains
Dishwashers	Water softeners	Bar connections
Garbage grinders	Water filters	Refrigerators
Disposals	Floor drains	Ice cube machines
Water Closets	Roof drains	Dental cuspidors
Wash basins	Drain tile receivers	Ice boxes
Bath tubs	Catch basin	Acid tanks
Shower stalls	Yard drains	Oil separators
Urinals	Grease trap (requires plan approval)	Connections to machines
Laundry tubs	Sumps	Connections to appliances
Bubblers	Pumps	Fire protection installations
Water Heaters	Ejectors	
Palmer Valve	RP Valves	TOTAL FIXTURES

Excerpt from City of Green Bay Plumbing Code:

Section 16.06 Permit must be procured before starting work: If any work regulated by the Plumbing Ordinance for which a permit is required is commenced without a permit first having been obtained thereof, double the permit fee herein prescribed shall be paid when a permit finally is obtained. Payment of any fee mentioned in this Section, however, shall in no way relieve any person of the penalties that may be imposed for violation of the Plumbing Ordinance.

24-hours notice of inspection is required.

Check box for Online Payment

The information below shall be provided for notification of project number and permit fee. This information is required to make payment online.

Phone _____ Fax _____ Email _____



HOMEOWNER'S APPLICATION FOR PLUMBING PERMIT

COMMUNITY SERVICES AGENCY
Inspection Division
100 N. Jefferson Street, Rm. 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 - fax
inspmail@greenbaywi.gov

Name: _____
Address: _____
Phone #: _____
Email: _____

This section for City use only	
Project #:	_____
Permit Code:	_____
Permit Fee:	_____
Parcel #	_____
Receipt #:	_____
Date:	_____

Description of work: _____

Number of fixtures roughed in for and/or installed: _____
(\$.700 per fixture, \$50.00 minimum permit fee)

Application is hereby made to do the above described plumbing work at the premises named above. Issuance of the permit is based on §145.13 of the State Code allowing a property owner to perform plumbing in a building owned and occupied by him as his home.

AFFIDAVIT: I hereby certify that I am the owner of the above described premises located in Green Bay, Brown County, and that I occupy such premises solely as a residence, in accordance with the Homestead Act of the laws of the State of Wisconsin. I further declare that if the permit is granted the plumbing work will be performed by myself in accordance with State and City regulations. Failure to do so will subject me to penalties described in the State and City Ordinances.

Owner's signature Date

The City of Green Bay hereby permits the above described plumbing work to be performed at the address stated above, subject to all laws and regulations of the City of Green Bay and the State of Wisconsin.

When this job is complete, please call (920) 448-3300 to schedule a final inspection.

By: _____
Plumbing Inspector Date

TWENTY-FOUR HOURS NOTICE OF INSPECTION REQUIRED



LICENSED CONTRACTOR HEATING PERMIT

COMMUNITY SERVICES AGENCY
 Inspection Division
 100 N. Jefferson St., Rm. 608
 Green Bay, WI 54301
 (920) 448-3300 - phone
 (920) 448-3117 - fax
inspmail@greenbaywi.gov

Project Address: _____

Owner: _____

Heating Contractor: _____

Contractor's Email: _____

Contractor's Phone #: _____ Unit Price: _____ Value of Work: _____

This section for City use only

Project #: _____

Permit Fee: _____

Parcel #: _____

Receipt #: _____

Date: _____

Check all that's applicable:

FURNACE: Gas _____ Electric _____ Oil _____ Forced Air _____

AIR CONDITIONER: Forced Air _____ Central Air _____

BOILER: Steam _____ Hot Water _____ Res _____ Industrial _____ Commercial _____

SPACE HEATER: Type _____ Unit _____ Class _____

I hereby make application for a permit for the following described heating work at the above location.

Contractor's Signature: _____ Credential # _____

Check box for Online Payment

The information below shall be provided for notification of project number and permit fee. This information is required to make payment online.

Phone _____ Fax _____ Email _____



HOMEOWNER'S APPLICATION FOR HEATING PERMIT

COMMUNITY SERVICES AGENCY
Inspection Division
100 N. Jefferson Street, Rm. 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 - fax
inspmail@greenbaywi.gov

Name: _____
Address: _____
Phone #: _____
Email: _____

This section for City use only	
Project #:	_____
Permit Code:	_____
Permit Fee:	_____
Parcel #	_____
Receipt #:	_____
Date:	_____

Description of work: _____

Application is hereby made to do the above described heating work at the premises named above. Issuance of the permit is based on §145.13 of the State Code allowing a property owner to perform heating work in a building owned and occupied by him as his home.

AFFIDAVIT: I hereby certify that I am the owner of the above described premises located in Green Bay, Brown County, and that I occupy such premises solely as a residence, in accordance with the Homestead Act of the laws of the State of Wisconsin. I further declare that if the permit is granted the heating work will be performed by myself in accordance with State and City regulations. Failure to do so will subject me to penalties described in the State and City Ordinances.

Owner's signature

Date

The City of Green Bay hereby permits the above described heating work to be performed at the address stated above, subject to all laws and regulations of the City of Green Bay and the State of Wisconsin.

When this job is complete, please call (920) 448-3300 to schedule a final inspection.

By: _____
Heating Inspector

Date

TWENTY-FOUR HOURS NOTICE OF INSPECTION REQUIRED