



City of Green Bay  
Department of Community and Economic Development

## 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 2<sup>nd</sup> 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 3<sup>rd</sup> & 4<sup>th</sup> 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 5<sup>th</sup> & 6<sup>th</sup> 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 7<sup>th</sup> & 8<sup>th</sup> 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.

An **Erosion Control** permit form is also included and, if required by the Erosion Control Permitting Process flowchart, must be submitted with an **Erosion Control Plan**.

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.**

**If you have any questions concerning these permits, please contact the Department of Community and Economic Development at (920) 448-3300 and ask for a Building, Electrical, Plumbing, or HVAC Inspector.**

I:\DeptData\Planning\Inspection Division\Forms\Fillable\Packet-ResidentialBuildingPermitInformation.pdf



www.greenbaywi.gov

# PROJECT PERMITS APPLICATION

All fields must be completed before permit will be processed.

Department of Community  
and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
inspmail@greenbaywi.gov

<b>Project Address</b>		<b>Parcel #</b>	<b>Project #</b> (assigned by City)	
<b>Property Owner</b>		<b>Contractor</b>		
Name		Name		
Company (if applies)		Company		
Address		Address		
City, State, Zip		City, State, Zip		
Phone #		Phone #		
Email		Email		
<b>Current Land Use, Flood Plain &amp; Zoning</b> (check which applies)				
Land Use:    Vacant Lot    I-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				
<b>Project Scope:</b> New    Addition    Alteration    Repair    Move    Raze (demolish)    Change-of-use				
(check all that apply)    Height    Area: Finished    Unfinished    Total Bldg:				
<b>Description of Project ↓:</b>			<b>Estimated Cost of Construction \$</b>	
<b>Plan Approvals</b>				
PLBG Plan	# _____	City	SBD \$ _____	<input type="checkbox"/> Erosion Control # _____ City <input type="checkbox"/> SBD \$ _____
SVWR Plan	# _____	City	SBD \$ _____	<input type="checkbox"/> Building Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____
Foot & Found Only	# _____	City	SBD \$ _____	<input type="checkbox"/> HVAC Plan # _____ <input type="checkbox"/> City <input type="checkbox"/> SBD \$ _____
				<input type="checkbox"/> Site Plan # _____ \$ _____
<b>Contractors (UDC Numbers Required): DCC #</b>			<b>DCQ #</b>	
<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 Fee \$ _____	<input type="checkbox"/> Storm Fee \$ _____
			Assessment \$ _____	<input type="checkbox"/> Sanitary Fee \$ _____
				Assessment \$ _____
<input type="checkbox"/> CERTIFICATE OF OCCUPANCY			C.O. \$ _____	
<input type="checkbox"/> EROSION CONTROL			Erosion Ctrl \$ _____	
<input type="checkbox"/> ADDITIONAL PERMITS (Sprinklers # _____, Curb Cut, Flood Plain, 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 \$ _____	
<b>Application Signature</b> The applicant certifies that information submitted herein is accurate; agrees to comply with the Wisconsin Administrative Code, Municipal Ordinance, and with the conditions of this permit; and understands that permit issuance creates no legal liability, expressed or implied, on the Department or Municipality.				
_____ <b>Signature of Applicant</b>			_____ <b>Date</b>	
<b>For Office Use Only</b>				
Reviewed By _____		Credential # _____	Class Code _____	Census _____
			Receipt No. _____	Total Fee _____

**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**



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and Economic Development  
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## 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 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 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.

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Owner Signature

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Date

White – Office

Yellow – Owner/Agent



# LICENSED CONTRACTOR ELECTRICAL PERMIT APPLICATION

Department of Community  
and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
[inspmail@greenbaywi.gov](mailto:inspmail@greenbaywi.gov)

All fields must be completed before permit will be processed.

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

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

**OCCUPANCY (check appropriate box):**

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

**NATURE OF WORK (check all that apply):**

Alteration      Repairs       Addition      Hot tub/spa       Swimming Pool  
 Remodeling      Sign      Detached Garage      Other \_\_\_\_\_

**JOB DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.

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

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

State of WI Electrical Contractor Certification # \_\_\_\_\_ and 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

The information below must be provided for notification of project number and permit fee. This information is required to make payment on-line.

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



# HOMEOWNER'S APPLICATION FOR ELECTRICAL PERMIT

Department of Community and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
[inspmail@greenbaywi.gov](mailto:inspmail@greenbaywi.gov)

**All fields must be completed before permit will be processed.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Value of Work: \$ \_\_\_\_\_

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

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
_____	_____
_____	_____

**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 electrical 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: \_\_\_\_\_  
(REQUIRED)

**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 Community and Economic Development Department 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.

**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**



# LICENSED CONTRACTOR PLUMBING PERMIT APPLICATION (INTERNAL)

Department of Community  
and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
[inspmail@greenbaywi.gov](mailto:inspmail@greenbaywi.gov)

All fields must be completed before permit will be processed.

Project Address: \_\_\_\_\_  
 Owner's Name: \_\_\_\_\_  
 Owner's Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Plumbing/Utility Contractor: \_\_\_\_\_  
 Contractor's Address: \_\_\_\_\_  
 Contractor's Email: \_\_\_\_\_  
 Contractor's Phone #: \_\_\_\_\_ Value of Work: \_\_\_\_\_

**This section for City use only**

Project #: \_\_\_\_\_  
 Permit Code: \_\_\_\_\_  
 Permit Fee: \_\_\_\_\_  
 Parcel #: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_  
 Date: \_\_\_\_\_

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

General Interior Plumbing	
	Total Number of Fixtures
	Total Number of Appliances
	Total Number of Appurtenances
	<b>Total Count</b>

**Description of Work:**

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**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**

Contractor's Signature: \_\_\_\_\_ Master Plumber Credential # \_\_\_\_\_

Check box for Online Payment

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

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

**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.



# HOMEOWNER'S APPLICATION FOR PLUMBING PERMIT

Department of Community and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
[inspmail@greenbaywi.gov](mailto:inspmail@greenbaywi.gov)

All fields must be completed before permit will be processed.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_

Value of Work: \$ \_\_\_\_\_

Description of work: \_\_\_\_\_

Number of fixtures roughed in for and/or installed: \_\_\_\_\_ (\$7.00/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 §145.06(4)(a) of the State Code allowing a property owner to perform plumbing work in a one-family building owned and occupied (per SPS 382.10(2) of the State Code) by him or her as his or her 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

**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**

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.

By: \_\_\_\_\_  
Plumbing Inspector

\_\_\_\_\_  
Date

(Rev 6/20)



# LICENSED CONTRACTOR HEATING PERMIT APPLICATION

Department of Community  
and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
inspmail@greenbaywi.gov

All fields must be completed before permit will be processed.

Project Address: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner's Email: \_\_\_\_\_ Phone #: \_\_\_\_\_

Heating Contractor: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

Contractor's Email: \_\_\_\_\_

Contractor's Phone #: \_\_\_\_\_ Unit Price: \_\_\_\_\_ Value of Work: \_\_\_\_\_

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

Check all that apply:

**FURNACE:** Gas \_\_\_\_\_ Electric \_\_\_\_\_ Oil \_\_\_\_\_ Forced Air \_\_\_\_\_

**AIR CONDITIONER:** Forced Air \_\_\_\_\_ Central Air \_\_\_\_\_

**BOILER:** Steam \_\_\_\_\_ Hot Water \_\_\_\_\_ Res \_\_\_\_\_ Industrial \_\_\_\_\_ Commercial \_\_\_\_\_

**SPACE HEATER:** Type \_\_\_\_\_ Unit \_\_\_\_\_ Class \_\_\_\_\_

### This section for City use only

Project #: \_\_\_\_\_

Permit Code: \_\_\_\_\_

Permit Fee: \_\_\_\_\_

Parcel #: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Date: \_\_\_\_\_

**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**

Contractor's Signature: \_\_\_\_\_ Credential # \_\_\_\_\_

Check box for Online Payment

The information below must be provided for notification of project number and permit fee. This information is required to make payment on-line.

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



# HOMEOWNER'S APPLICATION FOR HEATING PERMIT

Department of Community and Economic Development  
100 N. Jefferson Street, Rm 608  
Green Bay, WI 54301-5026  
(920) 448-3300 - phone  
(920) 448-3426 - fax  
[inspmail@greenbaywi.gov](mailto:inspmail@greenbaywi.gov)

All fields must be completed before permit will be processed.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_  
Email: \_\_\_\_\_  
Value of Work: \$ \_\_\_\_\_  
Description of work: \_\_\_\_\_

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

Application is hereby made to do the above-described heating work at the premises named above. Issuance of the permit is based on SPS 305.70 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-named 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

**To schedule an inspection, submit an online Inspection Request or call (920) 448-3300 at least one business day in advance. Final inspections are required for all projects.**

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.

By: \_\_\_\_\_  
Heating Inspector

\_\_\_\_\_  
Date



# EROSION CONTROL PERMIT APPLICATION

**Department of Community  
and Economic Development**  
 100 N. Jefferson Street, Rm 608  
 Green Bay, WI 54301-5026  
 (920) 448-3300 - phone  
 (920) 448-3426 - fax  
 inspmail@greenbaywi.gov

**Small Site General Instructions:** Submit this application and erosion control plan demonstrating compliance with Ch. 34, Green Bay Municipal Ordinance and/or Ch. SPS 321.125, Uniform Dwelling Code, for sites covering less than one acre and/or one- or two-family residential construction prior to commencing land-disturbing construction or land-development activity to Room 610.

**Large Site General Instructions:** Submit application and erosion control plan demonstrating reasonable compliance with Ch. 34, Green Bay Municipal Ordinance, for sites one acre or greater in size prior to commencing land-disturbing construction or land-development activity to Room 610.

**Excavation within Public Rights-Of-Way General Instructions:** Submit this application and erosion control plan demonstrating compliance with Ch. 34, Green Bay Municipal Ordinance for land disturbances covered within section 34.04(1) (a) 1. 4,000 SF; 4. 100 LF of drainage conveyance impacts; 6. 300 LF of underground utility work; and/or 7. 100 CY or greater of excavation volume prior to commencing land-disturbing construction or land-development activity to Room 300.

Address/Street of land-disturbing activity:			Parcel #:	Zoning District:	Project #:	Site #
<b>APPLICANT</b>	Property Owner	General Contractor	<b>EROSION CONTROL CONTRACTOR</b>		Same as Applicant	
Name			Name			
Company			Company			
Address			Address			
City, State, Zip			City, State, Zip			
Phone			Phone			
Email			Email			

**Description of Activity:**

Raze Site      Fill Site      Excavation Site      Construction Site      Acres \_\_\_\_\_      Start \_\_\_\_\_      End \_\_\_\_\_

**Erosion Control Plan:** (provide 3 copies) \*Must demonstrate compliance with Ch. 34, Green Bay Municipal Ordinance and/or Ch. SPS 321.125 UDC, including but not limited to all of the following:

- |                                                                                                            |                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Application<br>2. Property legal description<br>3. Existing site map / plan<br>4. Final site map / plan | 5. Site construction plan<br>6. Soil loss prediction tool / spreadsheet<br>7. Erosion & Sediment Control Plan Statement (Narrative description of who, what, when, where, how things will be completed on the proposed site(s)). |
|------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Following sections to be completed by the City of Green Bay**

**Plan Approval:** Permit is void unless signed by the Erosion Control Specialist.

Erosion Control Plan reviewed and approved by Erosion Control Specialist: \_\_\_\_\_ Date: \_\_\_\_\_

**Permit Issuance:**

1. **Duration** – This erosion control permit shall remain valid for a period of 180 days or for the length of the building permit, whichever is longer. The Erosion Control Specialist or designated representative may extend the period one or more times for up to an additional 180 days, and may require additional erosion control measures as a condition of the extension if necessary to meet the requirements of this ordinance.

Permit Expiration Date: \_\_\_\_\_

2. **Surety Bond** - As a condition of approval and issuance of the permit, the Public Works Director may require the applicant to deposit a surety bond or irrevocable letter of credit to guarantee a good faith execution of the erosion control plan.

Surety Bond Amount \$ \_\_\_\_\_ Date Filed: \_\_\_\_\_

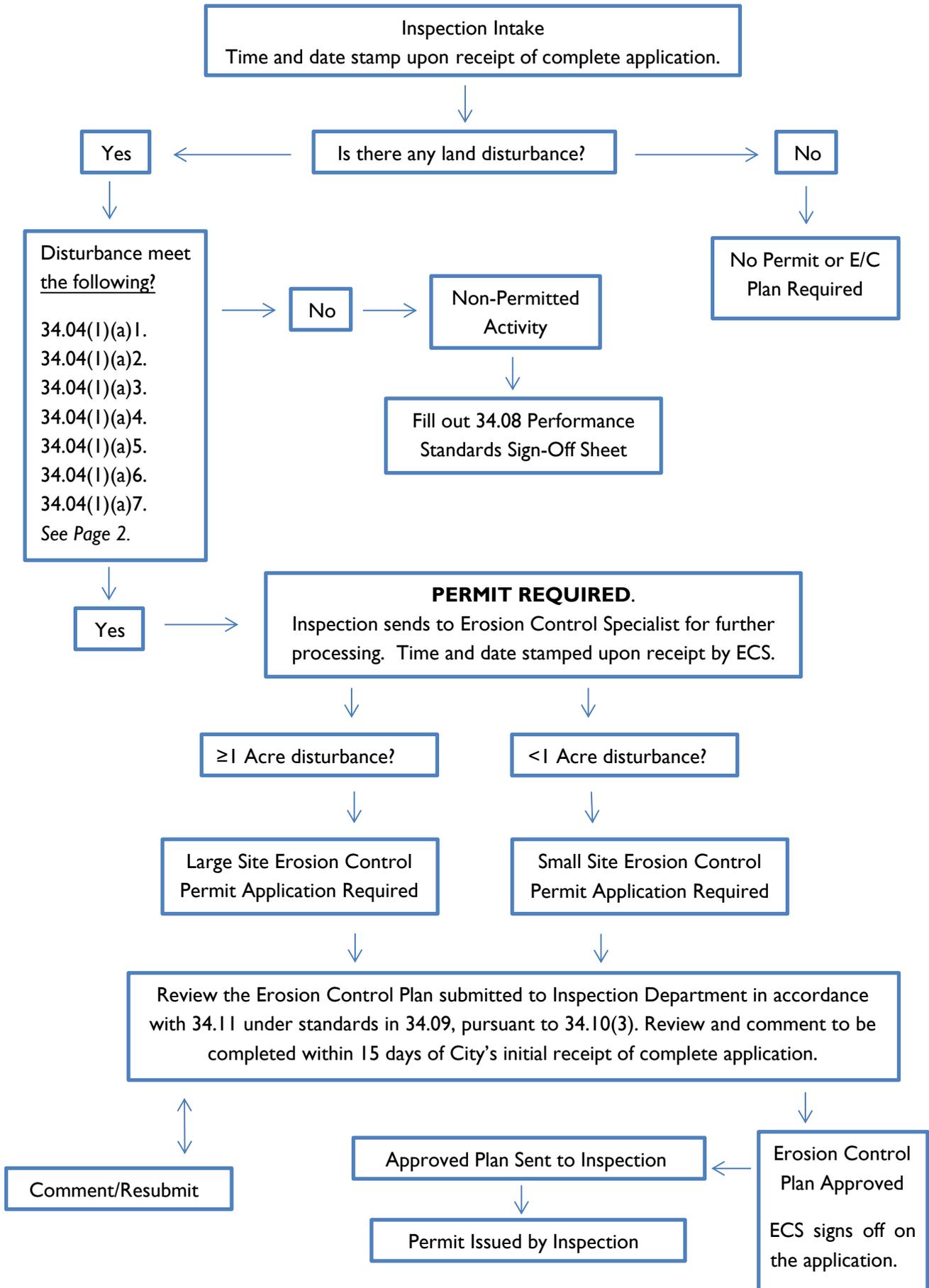
3. **Conditions of Approval** - This permit approval requires the applicant to:

- a. Notify the Erosion Control Specialist / designated representative at least **48 hours before** commencing any land-disturbing construction or land-development.
- b. Notify the Erosion Control Specialist / designated representative of completion of any erosion control measures within seven days after their installation.
- c. Obtain permission in writing from the Erosion Control Specialist / designated representative prior to modifying the erosion control plan.
- d. Install all erosion control measures as identified in approved erosion control plan.
- e. Maintain all road drainage systems, storm water drainage systems, control measures, and other facilities identified in erosion control plan.
- f. Repair any siltation or erosion damage to adjoining surfaces and roadways resulting from land-developing construction or land-disturbing activities.
- g. Inspect the construction erosion control measures after each rain of 0.5" or more and at least once each week and make needed repairs.
- h. Allow the Erosion Control Specialist / designated representative to enter the site for the purpose of inspecting compliance with the erosion control plan or for performing any work necessary to bring the site into compliance with the erosion control plan.
- i. Keep a copy of the approved erosion control plan on the site.
- j. Submit weekly inspection reports to the Erosion Control Specialist via e-mail at [erosioncontrol@greenbaywi.gov](mailto:erosioncontrol@greenbaywi.gov)

**Failure to comply with any of these conditions may subject the permittee to corrective action, fines, and/or revocation of the permit at permittees sole expense.**

Permit Issued By: \_\_\_\_\_ Date: \_\_\_\_\_

# Erosion Control Permitting Process For Land Disturbing Projects Outside of the Public Rights-of-Way



## **APPLICABILITY AND JURISDICTION**

**34.04(1)(a)1.** Those involving grading, removal of protective ground cover or vegetation, excavation, land filling, or other land-disturbing construction activity affecting a surface area of 4,000 sq. ft. or more.

**34.04(1)(a)2.** Those requiring a subdivision plat or certified survey approval or the construction of 1- and 2-family residential dwellings or commercial, industrial, or institutional buildings on lots of approved subdivision plats.

**34.04(1)(a)3.** Those requiring a certified survey approval or the construction of houses or commercial, industrial, or institutional buildings on lots of approved certified surveys.

**34.04(1)(a)4.** Those involving street, highway, road, or bridge construction, enlargement, relocation, or reconstruction.

**34.04(1)(a)5.** A construction site, which has 100 linear feet or greater of land disturbance to a highway, street, driveway, swale, ditch, waters of the state, wetland, protective area, or other non-agricultural drainage facility which conveys concentrated flow. Wetlands shall be delineated in accordance with s. NR 103.08(1m).

**34.04(1)(a)6.** Those involving the laying, repairing, replacing, or enlarging of an underground pipe, wire, cable, or facility for a distance of 300' or more.

**34.04(1)(a)7.** A construction site which has 100 cubic yards or greater of excavation volume, filling volume, or some combination of excavation and filling volume.