

**City of Elkhorn**

**Residential Building Permit  
Information Packet**

**New Residential  
Single Family Dwelling**

# City of Elkhorn

## New Residential Single Family Dwelling

The following is required for all new homes and must be included in packet returned to the building inspector:

1. Two sets of plans
2. Two copies of a certified survey. (Erosion control, storm water and elevations, and sewer/water connection to the main should be shown on one copy)
3. Building/Zoning applications
  - ✓ Applications must be filled out completely to insure prompt service
  - ✓ Applications must include the name, address and license numbers of all contractors
4. Fill out City of Elkhorn Application and Agreement for Utility Service if moving or upgrading electric service
5. Heat Calculations or WISCHECK
  - ✓ Calculations must be submitted in Wisconsin format
6. WALCOMET application
7. Attic and soffit vent calculations
8. A copy of Truss specifications at job-site for rough building inspection
9. Estimated cost
10. One set of approved plans shall be available on job-site for inspector. Plans must be stamped and signed by the building inspector
11. Any field changes to the approved print, must be submitted to the Elkhorn Building Inspector's Office
12. Construction Drive
13. Certification of Foundation
14. City of Elkhorn Application & Agreement for Utility Service
15. Elkhorn Light & Water Locating & Restoration Agreement
16. Building Permit Application (carbon copies)

\*\* It is your responsibility as the applicant to place the permit card on the premises, visible from the street and protected from the weather. Construction Drive and silt fence shall be installed prior to construction.

\*\* Inspection requests need to be called in with 48 hrs notice preferred, although same day inspections may be handled. Please see attached sheets for a list of the required inspections and the information needed when requesting an inspection.

**City of Elkhorn**  
**Building Inspection & Zoning Departments**  
**Building Inspector**  
**(262) 741-5115**

# Inspection Requests Information

To schedule an inspection

Call:

**262-741-5115**

Please be ready to provide the following information. Your inspection **CANNOT** be scheduled without this information

- Municipality
- Inspection Address
- Permit Number
- Owner's Name
- Contractor
- Contact Phone Number
- Inspection Type
- Date & Time Ready for Inspection

Access for the inspector is required (ex: ladder, lock box, key location, etc).

\*\* It is your responsibility as the applicant to place the permit card on the premises, visible from the street and protected from the weather.  
Construction Drive and silt fence shall be installed prior to construction.

\*\* Inspection requests need to be called in with 48 hrs notice preferred, although same day inspections may be handled. Please see attached sheets for a list of the required inspections and the information needed when requesting an inspection. )

**Thank You for your Cooperation!**

## **Inspections Needed Checklist**

1. **Sanitary sewer, storm sewer and water lateral:** **BEFORE** backfilling of trench. System should be on test at time of inspection.
2. **Footing forms:** **BEFORE** any concrete is poured, bleeders must be installed eight feet on center.
3. **Foundation wall drain tiles:** **AFTER** 12” of stone is in place on top of tiles and 12” beyond edge of footing.
4. **Building sanitary drain:** **BEFORE** basement floor is poured.
5. **Basement floor:** **BEFORE** basement is poured and **AFTER** vapor barrier is in place. Clean out bleeder ends!!!
6. **Electrical Service:** **BEFORE** electric utility connection, underground pedestal or overhead service. Mark service location on survey.
7. **All roughs (carpentry, electrical, plumbing, HVAC):** **BEFORE** insulating.
  - ✓ These should be called in together whenever possible
  - ✓ At this time, all penetrations should be sealed for inspection
  - ✓ Copy of Truss specs shall be supplied for the inspector at Rough Inspection
8. **Insulation:** **BEFORE** applying any finished materials.
9. **Final Inspection:** **ALL** carpentry, electrical, plumbing HVAC and other mechanical installations **BEFORE** any occupancy will be issued. (Working kitchen, one complete full bathroom, final grade, address sidewalk and driveway if applicable).
10. **Water Meter:** **MUST** be installed prior to occupancy.

Failure to request an inspection is in violation of Local and State Building Code and will be subject to a fine, which will be levied against the property owner.

**Certificate of Occupancy:** will be issued after a final inspection has been done and the building inspector deems the property suitable for occupancy. The building may not be occupied until a certificate has been issued.

## **Contractors Installing Sewer and Water Laterals**

### **Sewer Laterals Must be Tested per:**

Comm 82.21(1)(b)(2) – Plumber shall make arrangements for inspector to inspect all parts of plumbing system

Comm 82.21(5)(d)(b) – All plumbing to be left exposed until it has been tested

Comm 82.21(5)(d)(b)(2) a & b – Building sewer to be tested with a head of water not less than 10' for 15 minutes or with air at three pounds per square inch for 15 minutes

Comm 82.30(11)(3)(c) – Building sewers to be protected from frost which are located less than 42" below finish grade

Comm 82.30(11)(e)(2)(a) – Building sewers to have the trench bottom excavated 3" below sewer and brought back to grade with sand, pea gravel, or a graded stone bedding no more than a ¾" sieve. Backfill of building sewer shall be a minimum depth of 12" over sewer

Comm 82.35(3)(b) – Cleanouts to be provided on sanitary building sewers

### **Water Laterals:**

Comm 82.21(6) – Testing water lateral to be tested under the normal working pressure

Comm 82.40(8) – Frost Protection water laterals to be protected from frost per 82.30-1 and Table 82.30-6

Comm 82.40(8)(4)(a)(b)(6)(7) – water laterals to be a minimum 12" above building sewer line or a minimum 30" away horizontally

### **Water Department Requirements**

1. Foot Block required for valve box
2. Check curb box for leaks and operation
3. Valve box and extension to have no bends
4. Locate and identify curb stop
5. Extend curb box to grade

### **Building and Zoning Code Requirements**

1. Repair and replace erosion control measures
2. Clean up street of mud and gravel
3. Repair/Replace any damage to site (lot)

## **Foundation Height**

1. Every survey that is submitted for a new home must show an elevation for the top of the foundation
2. This should be based off of the suggested yard grade per the master-grading plan.
3. If the master-grading plan is unavailable, then there should be a proposed top of foundation height approved by the City Engineer
4. The foundation height needs to be established so the surveyor is able to perform a foundation re-certification
5. Foundation re-certification must be received before a rough building inspection

# Certification of Foundation

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      Owner: \_\_\_\_\_

I hereby certify that I have surveyed the Foundation for the proposed building located at \_\_\_\_\_ under building permit number # \_\_\_\_\_ and the setbacks & footings elevations for the proposed building are as follows:

\_\_\_\_\_ Front Yard Setback ..... \_\_\_\_\_ Feet  
\_\_\_\_\_ Side Yard Setback ..... \_\_\_\_\_ Feet  
\_\_\_\_\_ Side Yard Setback ..... \_\_\_\_\_ Feet  
\_\_\_\_\_ Rear Yard Setback ..... \_\_\_\_\_ Feet

Top of foundation \_\_\_\_\_

\_\_\_\_\_  
Chief of Survey Party

\_\_\_\_\_  
Surveyor

\_\_\_\_\_  
Reg. No.

### **ONLY ANSWER THOSE THAT APPLY**

Special Conditions: Drop Garage Slab \_\_\_\_\_  
(No. of Courses)

Poured Walls \_\_\_\_\_

Full Block \_\_\_\_\_ No. of Courses \_\_\_\_\_

Modular Block \_\_\_\_\_ No. of Courses \_\_\_\_\_

Height of Foundation Wall \_\_\_\_\_

\_\_\_\_\_  
Date

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

## **Sample of Scale Plot Plan – Directions**

1. List the direction of north on the plot
2. List what the scale is (e.g. 1'=30')
3. Draw all structures existing and proposed on the plan to scale
4. Show location of well and septic
5. Be sure that the setbacks listed on the application are the same as on the plot plan
6. Label all structures
7. Setbacks are the distances from the closest point of a structure to a lot line
8. Show all streets that border the property
9. Setback requirements with a scaled plot plan are one and one half times the normal requirement that would be accepted with a plat of survey. EX: If the zoning requirement setback from the rear yard to the structure is 50 feet, it would be 75 feet if you are using a scaled plot plan. (A plat of survey is a survey done by a Wisconsin licensed surveyor).
10. Show the location of the driveway. This locates the front of the structure for zoning purposes

This is the minimum of information that is required

**WITHOUT THIS INFORMATION YOUR APPLICATION WILL BE DENIED AND  
LENGTHEN THE TIME IT TAKES TO ISSUE YOUR PERMIT**



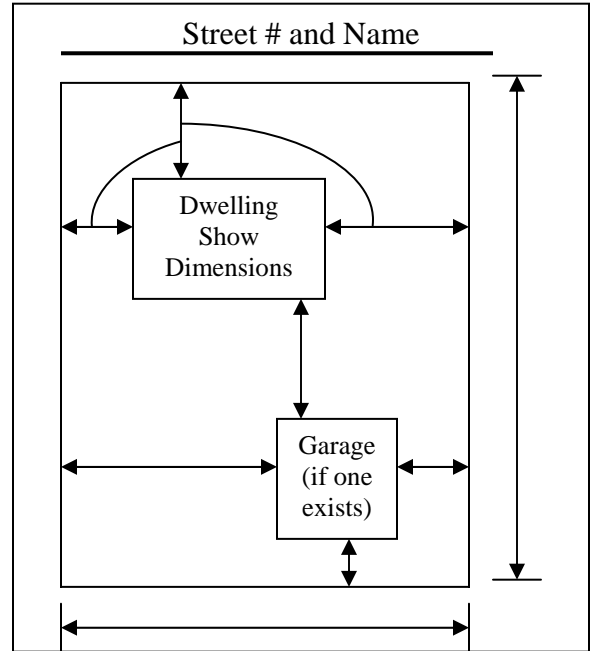
# Building Permit – Plot Plan

EXAMPLE:

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Name of Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Project Description: \_\_\_\_\_  
Present Zoning: \_\_\_\_\_

**Important Required Data:**

- A – Lot Stakes Must Be Accessible
- B – Show All Present Existing Buildings or Structures on your Lot
- C – Lot Size and Building Location
- D – Indicate North Direction
- \* Dimensions as Per Zoning Ordinance



**Sketch Your Plot Plan Below – Supply Complete Information – Locate Buildings On Lot & Show All Dimensions To Lot Lines – See Sketch Above For Example**

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Signature: \_\_\_\_\_

NOTE: With proper detailing of building dimensions, material types, spans, sizes, spacing,  $F_b$ , properties, etc., and strikeouts of non-applicable details, this cross section would provide an acceptable plan drawing. With the local inspection authority's permission, this drawing may be detailed by a designer and submitted as part of a plan package for plan review. ( $F_b$  - Fiber bending stress of selected lumber. Alternatively, grade and species information may be noted.)

OWNER: \_\_\_\_\_  
 PROJ. LOC: \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 DESIGNER: \_\_\_\_\_

VENTING: \_\_\_\_\_  
 ROOF SLOPE: \_\_\_\_\_  
 ROOFING: \_\_\_\_\_  
 UNDERLAYMENT: \_\_\_\_\_  
 DECKING: \_\_\_\_\_  
 RAFTERS/TRUSSES: \_\_\_\_\_  
 AIR CHUTES: \_\_\_\_\_  
 EAVE PROT: \_\_\_\_\_

VENTING: \_\_\_\_\_

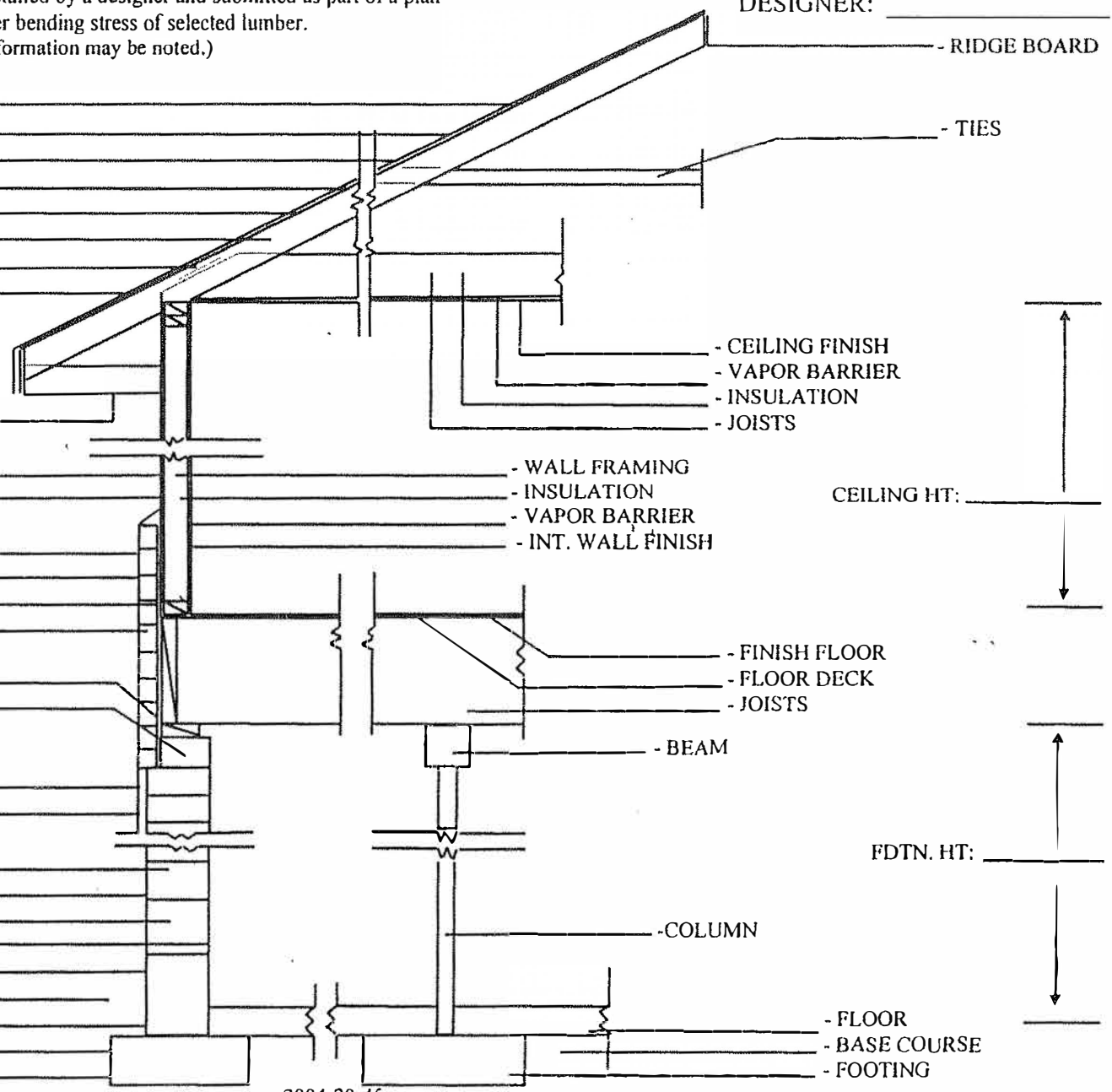
EXT. COVERING: \_\_\_\_\_  
 EXT. SHEATHING: \_\_\_\_\_

MAS. VENEER: \_\_\_\_\_  
 AIR SPACE: \_\_\_\_\_  
 ANCHORAGE: \_\_\_\_\_  
 FELT/FLASHING: \_\_\_\_\_

SILL PLATE: \_\_\_\_\_  
 TOP COURSE: \_\_\_\_\_  
 GRADE: \_\_\_\_\_

FDTN. INSUL: \_\_\_\_\_  
 INSUL. PROT: \_\_\_\_\_

FDTN. TYPE: \_\_\_\_\_  
 FDTN. THICKNESS: \_\_\_\_\_  
 REINFORCEMENT: \_\_\_\_\_  
 PILASTERS: \_\_\_\_\_  
 DAMPROOFING: \_\_\_\_\_  
 BACKFILL: \_\_\_\_\_  
 DRAIN TILES: \_\_\_\_\_  
 BLEEDERS: \_\_\_\_\_  
 FOOTING: \_\_\_\_\_



\_\_\_\_\_ - RIDGE BOARD

\_\_\_\_\_ - TIES

\_\_\_\_\_ - CEILING FINISH  
 \_\_\_\_\_ - VAPOR BARRIER  
 \_\_\_\_\_ - INSULATION  
 \_\_\_\_\_ - JOISTS

\_\_\_\_\_ - WALL FRAMING  
 \_\_\_\_\_ - INSULATION  
 \_\_\_\_\_ - VAPOR BARRIER  
 \_\_\_\_\_ - INT. WALL FINISH

CEILING HT: \_\_\_\_\_

\_\_\_\_\_ - FINISH FLOOR  
 \_\_\_\_\_ - FLOOR DECK  
 \_\_\_\_\_ - JOISTS

\_\_\_\_\_ - BEAM

FDTN. HT: \_\_\_\_\_

\_\_\_\_\_ - COLUMN

\_\_\_\_\_ - FLOOR  
 \_\_\_\_\_ - BASE COURSE  
 \_\_\_\_\_ - FOOTING

# Standard Conditions of Approval

## Erosion Control

Permit Number: \_\_\_\_\_

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

1. Property owner/applicant responsible for compliance with Erosion Control Ordinance or Comm.21.125 and Conditionally Approved Plan.
2. Obtain permission in writing from the Building Inspector prior to modifying the approved Erosion Control Plan.
3. Install Erosion Control devices as identified in the Approved Erosion Control Plan.
4. Use of aggregate stone or other approved stone with minimum 3” diameter is required for access drives, 6” depth, 25’-50’ length, 10’-20’ width.
5. Protect all storm sewer inlets with approved Erosion Control devices.
6. Remove tracking (i.e. sediment) from street at the end of each work day. Maintain all road drainage systems and tracking provisions, storm water drainage systems, control measures and other facilities identified in the Erosion Control Plan.
7. Repair any siltation or erosion damage to adjoining surfaces and drainage ways resulting from land development or disturbing activities.
8. All soil storage piles shall be located at least 25 feet from any down slope road, lake, stream, wetland, ditch, channel, or other watercourse.
9. Stock piles that are left for more than 7 days should be seeded, covered with a tarp or have erosion control silt fences/bales installed on down slope side of the stock pile.
10. Inspect all Erosion Control devices after each rain of 0.5” or more and at least once each week and make needed repairs.
11. Maintain all Erosion Control devices until disturbed areas are stabilized (seed/sod/mulch disturbed areas as soon as possible).
12. Keep a copy of the Conditionally Approved Erosion Control Plan on site.
13. Call for the following inspections:
  - ✓ Permanent stabilization of disturbed area even after final occupancy of building
  - ✓ Corrections made regarding Notice of Non-Compliance issuance

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

# ELKHORN LIGHT & WATER

## NEW CONSTRUCTION

### New Account Application

9 S. BROAD ST  
P.O. BOX 920  
ELKHORN, WI 53121

SERVICE PHONE: 262-723-2223

BILLING PHONE: 262-723-2910

**\*\*\*RETURN THIS FORM TO ELKHORN LIGHT & WATER ALONG WITH THE \$10.00 PAYMENT\*\*\***

NAME		PRIMARY RESIDENCE <input type="checkbox"/> Yes <input type="checkbox"/> No		TODAY'S DATE	
SERVICE ADDRESS			UNIT/APT. #		PROPERTY OWNER
MAILING ADDRESS (IF DIFFERENT FROM SERVICE ADDRESS)					RESIDENTIAL CUSTOMERS ONLY
CITY		STATE	ZIP		DRIVERS LICENSE #
PREVIOUS ADDRESS					DATE OF BIRTH
CITY		STATE	ZIP		PHONE #
EMPLOYER (CONTACT PERSON IF BUSINESS)			PHONE		
CITY		STATE	ZIP		
NEAREST RELATIVE (RESIDENTIAL CUSTOMERS ONLY)					
NAME			ADDRESS		
CITY		STATE	ZIP	PHONE	
PLEASE CHECK ONE <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL					
The undersigned hereby makes application to Elkhorn Light & Water subject to its rates, rules and regulations.					
Signed _____		Social Security # or Tax ID # _____			

*****SERVICE TECHNICIAN USE ONLY*****		*****FOR OFFICE USE ONLY*****	
SINGLE PHASE _____	THREE PHASE _____	ACCOUNT # _____	
METER # _____	ELECTRIC	TAX KEY # _____	SEQUENCE # _____
BEGINNING READ _____		READY TO SET DATE _____	
SET BY: _____		ELECTRIC SERVICE/METER SET WORK ORDER # _____	
DATE: _____			
TEST DATE: _____			

ELECTRIC



# City of Elkhorn Electric Department Ready for Service Card

We look forward to providing you with electric service. Please sign, date, and send this card in when you are ready for service. You are ready for service after all of the requirements below have been met.

NAME	MAILING ADDRESS	CITY	STATE	ZIP	
NEW SERVICE STREET/FIRE # ADDRESS	LOT #/SUBDIVISION	DAYTIME PHONE #	CITY	STATE	ZIP

The persons signing below are jointly and severally liable for utility charges at the service address above.

Customers shall pay the City of Elkhorn Electric Department for services rendered prior to the Company setting a meter or energizing the service.

CUSTOMER SIGNATURE	DATE	ACCEPTED BY: (ELKHORN L & W REPRESENTATIVE)
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**YOUR SITE IS READY FOR ELECTRIC SERVICE AFTER YOU HAVE COMPLETED ALL OF THE REQUIREMENTS BELOW**

- |  |  |
|--|--|
| <input type="checkbox"/> Application signed with address or fire #<br><br><input type="checkbox"/> Locate, mark or expose any buried obstruction or underground facilities - such as underground lighting - with stakes, spray, or flags.<br><br>City of Elkhorn Light and Water and/or its agents will not be held responsible for damage that occurs to customer owned underground facilities that are not properly located and marked prior to electric service installation.<br><br><input type="checkbox"/> Recorded copy of certified survey map<br><br><input type="checkbox"/> Building site sketch showing existing and future decks, pool, etc. plus the electric meter location with measurements | <input type="checkbox"/> Have the ground around your home and along the service route within 6 inches of final grade<br><br><input type="checkbox"/> Appropriate statement or inspection form for electric utility required before meter(s) can be set<br><br><input type="checkbox"/> Clear a minimum 10-foot wide path along the service route from the property line to the meter location. Please make sure things like dirt piles and construction materials are not in the service route.<br><br><input type="checkbox"/> Payment of bill<br><br><input type="checkbox"/> We must receive Electric Service Release from the Building Inspector |
|--|--|

Upon completion of all of the above requirements, send this Ready for Service Card to:

City Of Elkhorn  
Electric Department  
400 Koopman Ln  
P.O. Box 920  
Elkhorn WI 53121

- I would rather not pay the Winter Charge so please hold my Ready for Service Card and install the electrical service after April 1st.

Additional Winter Frost Charges charges apply to installations performed December 1st through April 1st.

??Questions?? Call the 262-723-3138.

# ELKHORN LIGHT & WATER

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## LOCATING AND RESTORATION AGREEMENT

EL & W Project # \_\_\_\_\_

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

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

### LOCATING

Customer requests that Elkhorn Light & Water (E L & W) set poles or dig a trench on Customer's property located at the above address for the installation of poles, anchors, or underground electric wire.

Prior to digging, E L & W will mark the pole and anchor locations or underground trench route with wood lath or flags. E L & W will call Digger's Hotline to facilitate the marking of existing public utility underground facilities including electric, telephone, cable TV and natural gas.

The Customer agrees to physically mark the location of any and all other privately owned obstacles that lie underground within 10 feet of pole and anchor locations and 10 feet on either side of the proposed trenching route. Such obstacles include, but are not limited to, lot pins or survey markers, septic and sewer systems, water systems, buried wires for out-buildings or decorative lighting, and LP gas lines. Customer shall mark the location of all obstacles with stakes or flags, or by painting the ground. The Customer accepts the responsibility for damage to any such underground obstacle the Customer fails to mark, or marks incorrectly. The Customer shall also be responsible for repair arrangements.

### RESTORATION

The Customer is responsible for the restoration of the trench route after electric facilities are installed. Such restoration includes, but is not limited to, removal of soil removed from the trench, any black dirt and seeding or sodding of established lawns or roadway terraces.

The Customer is also responsible for restoration of property owned by parties other than the Customer located at:

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

\_\_\_\_\_  
Customer's Signature

\_\_\_\_\_  
Date



# City of Elkhorn

## Application and Agreement for Utility Service

### SITE INFORMATION

Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Subdivision \_\_\_\_\_

Square Footage of Building \_\_\_\_\_ Second Address (if duplex) \_\_\_\_\_

Building Type  Frame Construction  Factory Built Structure  
 Mobile Home  Other (garage, outbuilding, etc.) \_\_\_\_\_

Current Construction Stage  No Start  Capped Basement & Backfilled  Fully Enclosed  
 Excavated  Framed  Finishing

Estimated Date of Delivery \_\_\_\_/\_\_\_\_/\_\_\_\_ (for mobile home or factory built structure)

Is there life support at this address?  Yes  No

### HOME OWNER INFORMATION

Name \_\_\_\_\_ Additional Name \_\_\_\_\_

Current Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ (day) \_\_\_\_\_ (evening) Employer \_\_\_\_\_

### CONTRACTOR INFORMATION

Company Name \_\_\_\_\_ Phone \_\_\_\_\_ (Office/Main)

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ (Alternate/Mobile)

Address \_\_\_\_\_ Fax \_\_\_\_\_

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

### ELECTRICAL CONTRACTOR INFORMATION

City License?  Yes  No

Company Name \_\_\_\_\_ Phone \_\_\_\_\_ (Office/Main)

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ (Alternate/Mobile)

Address \_\_\_\_\_ Fax \_\_\_\_\_

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

### BILLING/CONTRACTOR INFORMATION

Who should be billed for electric installation?  Home Owner  Builder  
 Who should be billed for electric usage during construction?  Home Owner  Builder

**NEW SERVICE INFORMATION**

**Permanent Service:**

Estimated date electric service will be needed \_\_\_/\_\_\_/\_\_\_

Size  60  100  200  Other \_\_\_\_\_  
 Type  Overhead  Underground  
 Voltage  120/240V  120/208V  277/480V  
 240V  480V  
 1 Phase  3 Phase

**Temporary Service (if required):**

Estimated date temporary service will be needed \_\_\_/\_\_\_/\_\_\_

Size  60  100  200  Other \_\_\_\_\_  
 Type  Overhead  Underground  
 Voltage  120/240V  120/208V  277/480V  
 240V  480V  
 1 Phase  3 Phase

**REWIRE**

Rewire - Same Location:  Rewire - Different Location (E.L.W. APPROVED)

**Existing Electrical Service**

Size  60  100  200  Other \_\_\_\_\_  
 Type  Overhead  Underground  
 Voltage  120/240V  120/208V  277/480V  
 240V  480V  
 1 Phase  3 Phase

**Proposed Electrical Service**

Size  60  100  200  Other \_\_\_\_\_  
 Type  Overhead  Underground  
 Voltage  120/240V  120/208V  277/480V  
 240V  480V  
 1 Phase  3 Phase

Utility Conductor will cross over existing building.

**ELECTRIC EQUIPMENT SPECIFICATIONS**

	Quantity	Units		Quantity	Units
Electric Heating	_____	_____ kW	Heat Pump	_____	_____ tons
Water Heater	_____	_____ kW	Central Air Conditioning	_____	_____ tons
Other (kiln, welder, etc.)	_____	_____ kW or tons			

**IMPORTANT NOTICES**

**MAP MUST BE ATTACHED**

**ALLOW FOR SAGGING CONDUCTOR**

**CALL ELECTRIC DEPARTMENT FOR SPOTTING - 262-723-3138**

**ADDITIONAL COMMENTS**

The Company agrees to furnish, and the Customer agrees to take and pay for utility service in accordance with provisions and rates approved by the Public Service Commission; subject to all applicable rules of the Company on file with the Public Service Commission including, but not limited to, terms and conditions on the back hereof; until such time as the Customer discontinues service or elects to make a written application for service under a different schedule. Such, however, may not be exercised within a one-year period from the date of this application.

The persons signed below are jointly and severally liable for utility charges at the service address above.

Customers shall pay the Company for services rendered prior to the Company setting a meter or energizing the service.

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ACCEPTED BY: (ELKHORN L & W REPRESENTATIVE)



## **Sidewalk & Driveway Installation**

In order to construct a sidewalk or driveway the Director of Public Works must be notified. Please call the DPW Office at **(262) 723-2223** to discuss grades and construction information. An inspection must be done before excavating or pouring concrete.

# Standard Erosion Control Plan

## for 1- & 2-Family Dwelling Construction Sites

According to Chapters Comm 20 & 21 of the Wisconsin Uniform Dwelling Code, soil erosion control information needs to be included on the plot plan which is submitted and approved prior to the issuance of building permits for 1- & 2-family dwelling units in those jurisdictions where the soil erosion control provisions of the Uniform Dwelling Code are enforced. This Standard Erosion Control Plan is provided to assist in meeting this requirement.

### Instructions:

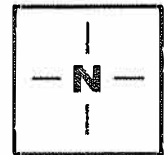
1. Complete this plan by filling in requested information, completing the site diagram and marking appropriate boxes on the inside of this form.
2. In completing the site diagram, give consideration to potential erosion that may occur before, during, and after grading. Water runoff patterns can change significantly as a site is reshaped.
3. Submit this plan at the time of building permit application.

PROJECT LOCATION \_\_\_\_\_

BUILDER \_\_\_\_\_ OWNER \_\_\_\_\_

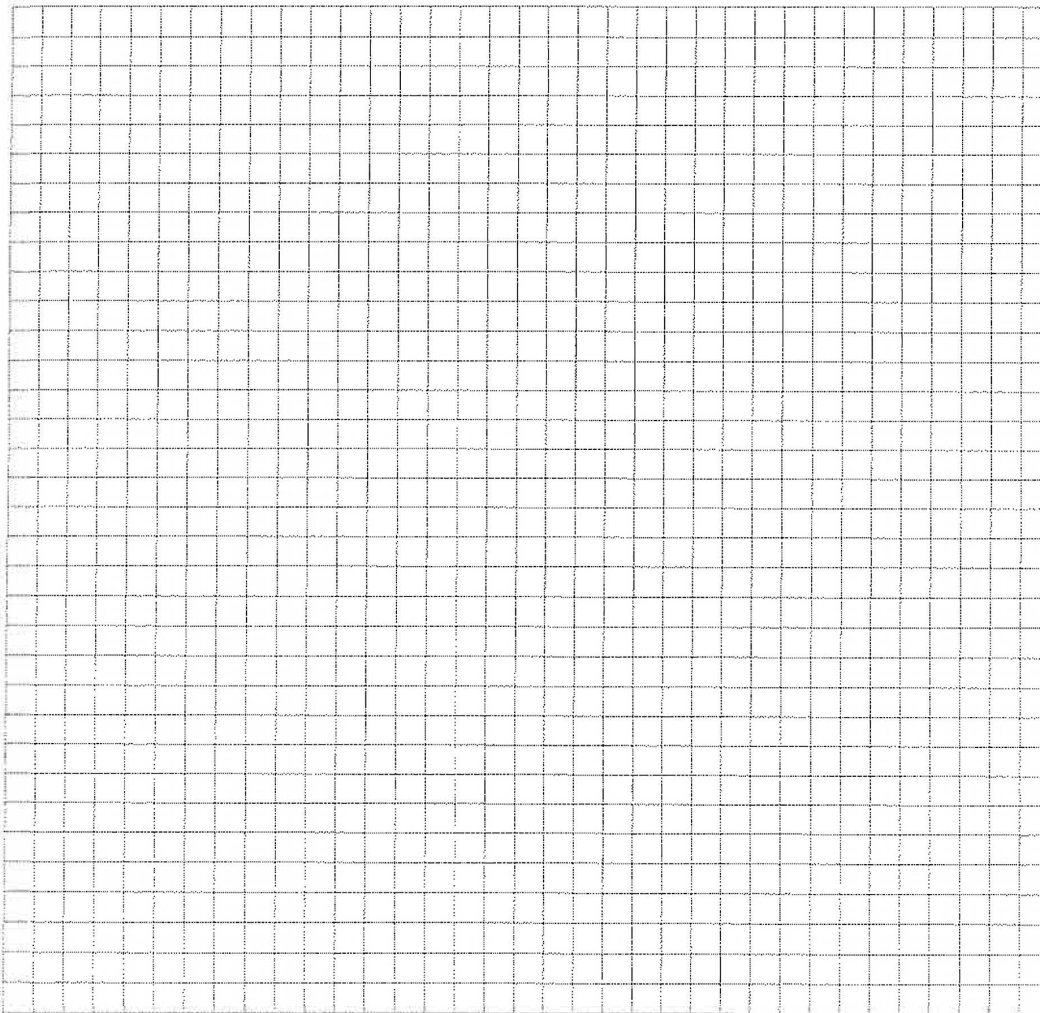
WORKSHEET COMPLETED BY \_\_\_\_\_ DATE \_\_\_\_\_

Please indicate north by completing the arrow.



### SITE DIAGRAM

Scale: 1 inch = \_\_\_\_ feet



### EROSION CONTROL PLAN LEGEND

- PROPERTY LINE
- > EXISTING DRAINAGE
- > TD TEMPORARY DIVERSION
- > FINISHED DRAINAGE
- - - LIMITS OF GRADING
- SILT FENCE
- STRAW BALES
- GRAVEL
- VEGETATION SPECIFICATION
- TREE PRESERVATION
- STOCKPILED SOIL

COMPLETED

NOT APPLICABLE

# EROSION CONTROL PLAN CHECKLIST

Check (✓) appropriate boxes below, and complete the site diagram with necessary information.

## Site Characteristics

- North arrow, scale, and site boundary. Indicate and name adjacent streets or roadways.
- Location of existing drainageways, streams, rivers, lakes, wetlands or wells.
- Location of storm sewer inlets.
- Location of existing and proposed buildings and paved areas.
- The disturbed area on the lot.
- Approximate gradient and direction of slopes before grading operations.
- Approximate gradient and direction of slopes after grading operations.
- Overland runoff (sheet flow) coming onto the site from adjacent areas.

## Erosion Control Practices

- Location of temporary soil storage piles.  
Note: Soil storage piles should be placed behind a sediment fence, a 10 foot wide vegetative strip, or should be covered with a tarp or more than 25 feet from any downslope road or drainageway.
- Location of access drive(s).  
Note: Access drive should have 2 to 3 inch aggregate stone laid at least 7 feet wide and 6 inches thick. Drives should extend from the roadway 50 feet or to the house foundation (whichever is less).
- Location of sediment controls (filter fabric fence, straw bale fence or 10-foot-wide vegetative strip) that will prevent eroded soil from leaving the site.
- Location of sediment barriers around on-site storm sewer inlets.
- Location of diversions.  
Note: Although not specifically required by code, it is recommended that concentrated flow (drainageways) be diverted (re-directed) around disturbed areas. Overland runoff (sheet flow) from adjacent areas greater than 10,000 sq. ft. should also be diverted around disturbed areas.
- Location of practices that will be applied to control erosion on steep slopes (greater than 12% grade).  
Note: Such practices include maintaining existing vegetation, placement of additional sediment fences, diversions, and re-vegetation by sodding or seeding with use of erosion control mats.
- Location of practices that will control erosion on areas of concentrated runoff flow.  
Note: Unstabilized drainageways, ditches, diversions, and inlets should be protected from erosion through use of such practices as in-channel fabric or straw bale barriers, erosion control mats, staked sod, and rock rip-rap. When used, a given in-channel barrier should not receive drainage from more than two acres of unpaved area, or one acre of paved area. In-channel practices should not be installed in perennial streams (streams with year round flow).
- Location of other planned practices not already noted.

COMPLETED

NOT APPLICABLE

Indicate management strategy by checking (✓) the appropriate box.

## Management Strategies

Temporary stabilization of disturbed areas.

Note: It is recommended that disturbed areas and soil piles left inactive for extended periods of time be stabilized by seeding (between April 1 and September 15), or by other cover, such as tarping or mulching.

Permanent stabilization of site by re-vegetation or other means as soon as possible (lawn establishment).

- Indicate re-vegetation method:  Seed  Sod  Other \_\_\_\_\_
- Expected date of permanent re-vegetation: \_\_\_\_\_
- Re-vegetation responsibility of:  Builder  Owner/Buyer
- Is temporary seeding or mulching planned if site is not seeded by Sept. 15 or sodded by Nov. 15?  Yes  No

Use of downspout and/or sump pump outlet extensions.

Note: It is recommended that flow from downspouts and sump pump outlets be routed through plastic drainage pipe to stable areas such as established sod or pavement.

Trapping sediment during de-watering operations.

Note: Sediment-laden discharge water from pumping operations should be ponded behind a sediment barrier until most of the sediment settles out.

Proper disposal of building material waste so that pollutants and debris are not carried off-site by wind or water.

Maintenance of erosion control practices.

- Sediment will be removed from behind sediment fences and barriers before it reaches a depth that is equal to half the height of the barrier.
- Breaks and gaps in sediment fences and barriers will be repaired immediately. Decomposing straw bales will be replaced (typical bale life is three months).
- All sediment that moves off-site due to construction activity will be cleaned up before the end of the same workday.
- All sediment that moves off-site due to storm events will be cleaned up before the end of the next workday.
- Access drives will be maintained throughout construction.
- All installed erosion control practices will be maintained until the disturbed areas they protect are stabilized.

# EROSION CONTROL REGULATIONS

Erosion control and stormwater regulations can be complex. Local, state and, in some cases, federal regulations may apply. Before construction make sure you have the appropriate permits.

## LOCAL ORDINANCES

Check with your county, city, village, or town for any local erosion control ordinances including shoreland zoning requirements. Except for new 1- & 2-family dwellings, local ordinances may be more strict than state regulations. They may also require erosion control on construction projects not affected by state or federal regulations.

## UNIFORM DWELLING CODE (DEPT. OF COMMERCE)

### CONTROLS REQUIRED

- Silt fences, straw bales, or other approved perimeter measures along downslope sides and side slopes.
- Access drive.
- Straw bales, filter fabric fences or other barriers to protect on-site sewer inlets.
- Additional controls if needed for steep slopes or other special conditions.

### FOR MORE INFORMATION, CONTACT:

- Local building inspector
- Department of Commerce, Safety and Buildings Division, P.O. Box 7970, Madison, Wis. 53707-7970, (608) 267-5113.

## STORMWATER PERMIT (DEPT. OF NATURAL RESOURCES)

### CONTROLS REQUIRED

- Erosion control measures specified in the *Wisconsin Construction Site Best Management Practice Handbook*.
- Measures to control storm water after construction.

### FOR MORE INFORMATION, CONTACT

- Department of Natural Resources, Storm Water Permits, P.O. 7921, Madison, WI 53707-7921, (608) 267-7694.

For more assistance on plan preparation, refer to the Wisconsin Uniform Dwelling Code, the DNR *Wisconsin Construction Site Best Management Handbook*, and UW-Extension publication *Erosion Control for Home Builders*. The *Wisconsin Uniform Dwelling Code* and the *Wisconsin Construction Site Best Management Handbook* are available through the State of Wisconsin Document Sales, (608) 266-3358.

*Erosion Control for Home Builders* (GWQ001) can be ordered through Extension Publications, (608) 262-3346 or the Department of Commerce, (608) 267-4405. A PDF version of *Erosion Control for Home Builders* (GWQ001) and *Standard Erosion Control Plan* are also available at <http://clean-water.uwex.edu/pubs/sheets>

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This publication is available from county UW-Extension offices or from Extension Publications, 45 N. Charter St., Madison, WI 53715. (608) 262-3346 or toll-free (877) 947-7827. A publication of the University of Wisconsin-Extension in cooperation with the Wisconsin Department of Natural Resources and the Wisconsin Department of Commerce.



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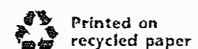
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GWQ001A Standard Erosion Control Plan for 1 & 2 Family Dwelling Construction Sites

DNR WT-458-96

R-03-02-2M-10-5

Editing and design by the Environmental Resources Center, University of Wisconsin-Extension



# WALCOMET CONNECTION APPLICATION

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LOCATION \_\_\_\_\_ TAX KEY NO. \_\_\_\_\_

OWNER \_\_\_\_\_ PHONE NO. \_\_\_\_\_

ADDRESS \_\_\_\_\_

WATER METER SIZE \_\_\_\_\_ SERVICE SIZE \_\_\_\_\_

NUMBER OF METERS \_\_\_\_\_ CUSTOMER UNITS \_\_\_\_\_

BUILDING USE \_\_\_\_\_

WALCOMET CONNECTION FEE: \$ \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE - OWNER/CONTRACTOR

\_\_\_\_\_  
INSPECTOR

WHITE/File • YELLOW/Clerk • PINK/WALCOMET • GOLD/Owner



## INSTRUCTIONS

The owner, builder or agents shall complete the application form down through the Signature of Applicant block and submit it and building plans and specifications to the enforcing municipality. Permit application data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local code administration. **Please type or use ink and press firmly with multi-ply form.**

### PERMIT REQUESTED

- Check off type of Permit Requested, such as structural, HVAC, Electrical or Plumbing.
- Fill in owner's current Mailing Address and Telephone Number.
- If the project will disturb one acre or more of soil, the project is subject to the additional erosion control and stormwater provisions of ch. NR 151 of the WI Administrative Code. Checking this box will satisfy the related notification requirements of ch. NR 216.
- Fill in Contractor and Contractor Qualifier Information. Per s. 101.654 (1) WI Stats., an individual taking out an erosion control or construction permit shall enter his or her dwelling contractor certificate number, and name and certificate number of the dwelling contractor qualifier employed by the contractor, unless they reside or will reside in the dwelling. Per s. 101.63 (7) Wis. Stats., the master plumber name and license number must be entered before issuing a plumbing permit.

### PROJECT LOCATION

- Fill in Building Address (number and street or sufficient information so that the building inspector can locate the site).
- Local zoning, land use and flood plain requirements must be satisfied before a building permit can be issued. County approval may be necessary.
- Fill in Zoning District, lot area and required building setbacks.

PROJECT DATA - Fill in all numbered project data blocks (1-14) with the required information. All data blocks must be filled in, including the following:

2. Area (involved in project):
  - Basements - include unfinished area only
  - Living area - include any finished area including finished areas in basements
  - Two-family dwellings - include separate and total combined areas
3. Occupancy - Check only "Single-Family" or "Two-Family" if that is what is being worked on. In other words, do not check either of these two blocks if only a new detached garage is being built, even if it serves a one or two family dwelling. Instead, check "Garage" and number of stalls. If the project is a community based residential facility serving 3 to 8 residents, it is considered a single-family dwelling.
9. HVAC Equipment - Check only the major source of heat, plus central air conditioning if present. Only check "Radiant Baseboard" if there is no central source of heat.
10. Plumbing - A building permit cannot be issued until a sanitary permit has been issued for any new or affected existing private onsite wastewater treatment system.
14. Estimated Cost - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.

SIGNATURE - Sign and date this application form. If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

CONDITIONS OF APPROVAL - The authority having jurisdiction uses this section to state any conditions that must be complied with pursuant to issuing the building permit.

ISSUING JURISDICTION: This must be completed by the authority having jurisdiction.

- Check off Jurisdiction Status, such as town, village, city, county or state and fill in Municipality Name
- Fill in State Inspection Agency number only if working under state inspection jurisdiction.
- Fill in Municipality Number of Dwelling Location
- Check off type of Permit Issued, such as construction, HVAC, electrical or plumbing.
- Fill in Wisconsin Uniform Permit Seal Number, if project is a new one- or two-family dwelling.
- Fill in Name and Inspector Certification Number of person reviewing building plans and date building permit issued.

PLEASE RETURN SECOND PLY WITHIN 30 DAYS AFTER ISSUANCE TO (You may fold along the dashed lines and insert this form into a window envelope.):

Safety & Buildings Division  
P O Box 2509  
Madison, WI 53701-2509



**UNIFORM  
EROSION CONTROL  
PERMIT APPLICATION**

Call:  
**(262) 723-2223**  
ILHR 20-06(a)3

APPLICATION NO. \_\_\_\_\_

TAX KEY # \_\_\_\_\_

**ISSUING  
MUNICIPALITY**

**CITY OF ELKHORN**

**PROJECT LOCATION**

**PROJECT DESCRIPTION**

**COMMERCIAL**  **ONE & TWO FAMILY**

Owner's Name \_\_\_\_\_ Mailing Address \_\_\_\_\_ Telephone - Include Area Code \_\_\_\_\_

Contractor's Name \_\_\_\_\_ Mailing Address \_\_\_\_\_ Telephone - Include Area Code \_\_\_\_\_

**PROJECT** \_\_\_\_\_ 1/4, \_\_\_\_\_ 1/4, SECTION \_\_\_\_\_, T \_\_\_\_\_, N, R \_\_\_\_\_ E(or)W \_\_\_\_\_

Building Address \_\_\_\_\_ Subdivision Name \_\_\_\_\_ Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_

Total lot area \_\_\_\_\_ square feet.  
 Area to be disturbed by construction \_\_\_\_\_ square feet.  
 Duration of land disturbance \_\_\_\_\_ days.  
 Estimated date when permanent seeding/sodding will be installed \_\_\_\_\_  
 Distance between disturbed area and any body of water or wetland \_\_\_\_\_ feet.

- For land disturbing activities covering less than one acre (43,560 sq. ft.), please submit a Survey Map to include the following:  
 existing site conditions, elevations/grade, project boundaries, proposed stock pile locations, proposed Erosion Control devices and location, final site conditions with grade, temporary drive locations, bodies of water within 200 feet of property.

- For land disturbing activities covering more than one acre, refer to Ordinance.

The applicant has reviewed and understands the Municipal code regarding Erosion Control, and shall implement the control plan for this project as approved by the Municipality; understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all the above information is accurate.

**SIGNATURE OF APPLICANT** \_\_\_\_\_

**DATE** \_\_\_\_\_

**CONDITIONS OF APPROVAL** This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Have Permit/Application number and address when **requesting inspections**. Call **(262) 723-2223**. Give at least 72 hours notice.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FEES:**

**PERMIT(S) REQUIRED**

**PERMIT EXPIRATION:**

**PERMIT ISSUED BY MUNICIPAL AGENT:**

Plan Review Fee \_\_\_\_\_  
 Inspection Fee \_\_\_\_\_  
 Administration Fee \_\_\_\_\_  
 Other \_\_\_\_\_  
 Total \_\_\_\_\_

Construction \_\_\_\_\_  
 HVAC \_\_\_\_\_  
 Electrical \_\_\_\_\_  
 Plumbing \_\_\_\_\_  
 Other \_\_\_\_\_

Permit expires per  
 Ordinance \_\_\_\_\_

Name \_\_\_\_\_  
 Date \_\_\_\_\_  
 Certification No. \_\_\_\_\_

## **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 Ss. 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 or an ordinance enacted under Ss. 101.654(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 any negligence by the contractor that occurs in connection with the work performed under the building permit.

**Additionaly:** Wisconsin Statute: 101.6 Compliance and penalties. (1) "Every builder, designer and owner shall use building materials, methods and equipment which are in conformance with the one and two family dwelling code."

**Consequently:** If the owner signs the Permit Application, the owner is held responsible for any code violation, Orders for Correction and/or citation(s) that may be issued in association with the Permit.

If a contractor signs the Permit as agent for the owner, the contractor is held responsible for any code violations, Orders for Correction and/or citation(s) that may be issued in association with the Permit.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

# CERTIFICATE OF ELECTRICAL INSPECTION

WPL 5482

- New service  
 Rewire

DATE \_\_\_\_\_

CUSTOMER NAME _____			OWNER OF PREMISES _____		
TOWNSHIP _____	COUNTY _____	RANGE _____	SECTION _____	STREET/FIRE NUMBER _____	
CITY _____	ELECTRICIAN'S NAME _____			TELEPHONE NUMBER _____	
ELECTRICIAN'S ADDRESS _____					

<b>TYPE OF SERVICE</b>	<input type="checkbox"/> Residence	<input type="checkbox"/> (Temp.) Service	<input type="checkbox"/> 1-Phase service entrance _____ AMPS _____ VOLTS
	<input type="checkbox"/> Farm	<input type="checkbox"/> Center Yd. Pole	<input type="checkbox"/> 3-Phase service entrance _____ AMPS _____ VOLTS
	<input type="checkbox"/> Commercial	<input type="checkbox"/> Permanent	<input type="checkbox"/> Underground <span style="float: right;"><input type="checkbox"/> Overhead</span>
	<input type="checkbox"/> Swing to Perm.	<input type="checkbox"/> Other _____	

This is to certify that I have examined the electrical entrance equipment (meter socket, switch box, ground) installed by the above and it is in compliance with the statutes, ordinances and all rules and regulations prescribed by the Wisconsin State Electric Code.

DISTRIBUTION: WHITE --- Municipality  
 CANARY --- Inspector  
 BUFF --- Utility

\_\_\_\_\_  
 Electrical Inspector Signature Date