

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**

Elkhorn Building & Zoning

Joe Mesler, Building Inspector
Monday & Wednesday, 1pm-4pm
262-741-5124 office, fax 262-741-5135
262-215-3711 cell

Bonnie Schaeffer, Zoning Administrator
Tuesday & Thursday, 9am-12pm
262-741-5124, fax 262-741-5135

Inspection requests need to be called in at 262-215-3711, with 48hrs 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.

Inspection Requests Information

To place an inspection, call Joe at:

262-741-5124

or

262-215-3711

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.)

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
LENTHEN THE TIME IT TAKES TO ISSUE YOUR PERMIT**

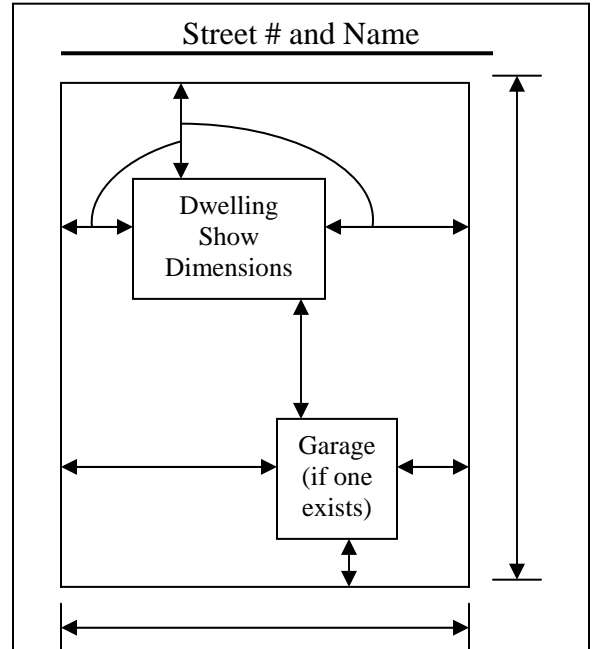
Building Permit – Plot Plan

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



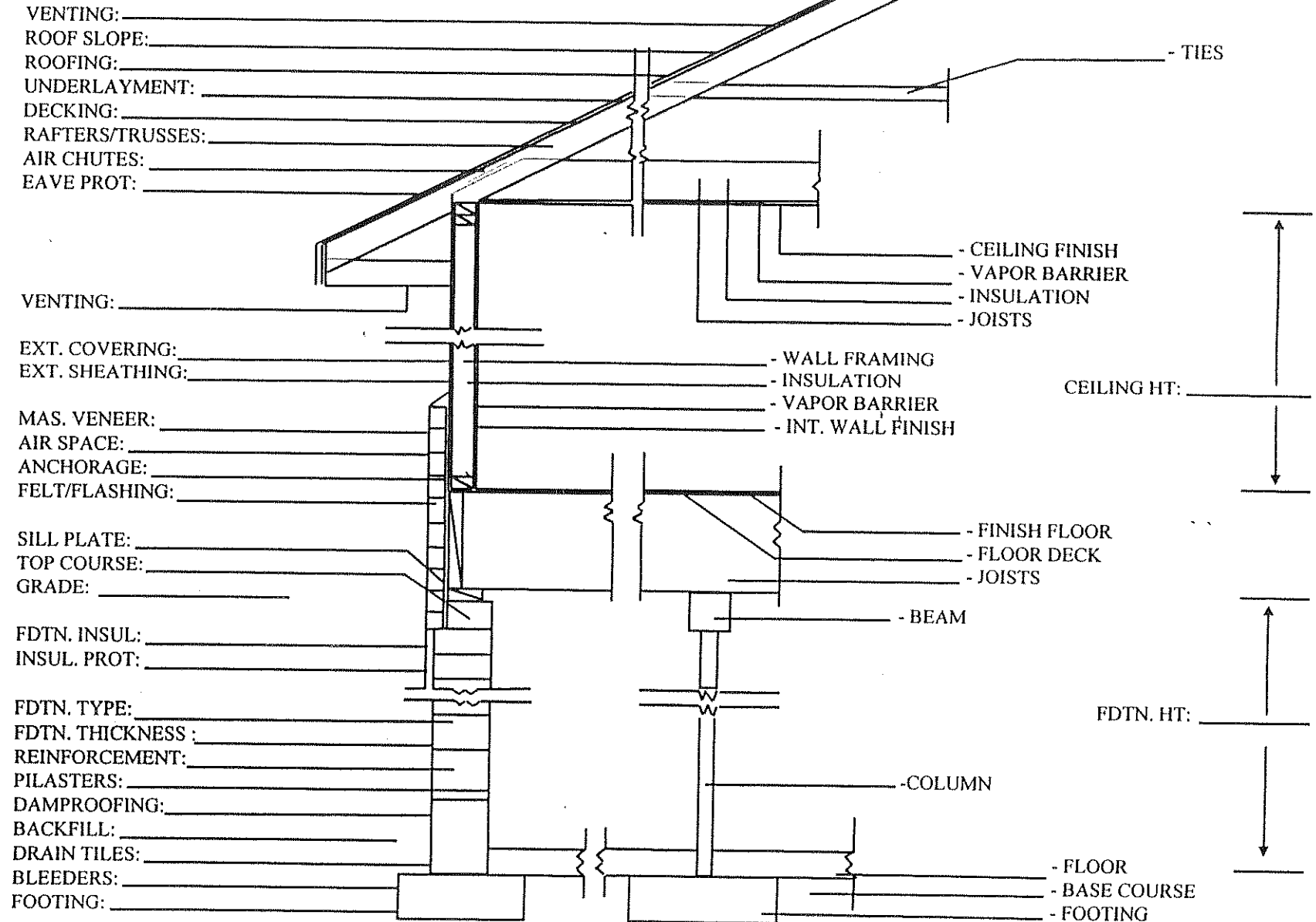
.....
Sketch Your Plot Plan Below – Supply Complete Information – Locate Buildings On Lot & Show All Dimensions To Lot Lines – See Sketch Above For Example

Blank area for sketching the plot plan.

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: _____



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: _____ / _____ / _____

UTILITY SERVICE APPLICATION ELKHORN LIGHT AND WATER

311 SEYMOUR :: P.O. BOX 920 :: ELKHORN, WISCONSIN 53121-0920
(262) 723-2910

REC'D DATE _____ INITIAL _____

<input type="checkbox"/> RESIDENTIAL-PRIMARY RESIDENCE-YES <input type="checkbox"/> NO <input type="checkbox"/>		<input type="checkbox"/> BUSINESS OCCUPANCY PERMIT -YES <input type="checkbox"/> NO <input type="checkbox"/>	
TODAY'S DATE X / /		REQUESTED DATE OF SERVICE X / /	
X NAME		X DATE OF BIRTH	
X DRIVER'S LICENSE # / ID		X STATE	
X NAME (SECONDARY)		DATE OF BIRTH	
DRIVER'S LICENSE # / ID		STATE	
X SERVICE ADDRESS		APT #	
MAILING ADDRESS IF DIFFERENT		APT #	
CITY		STATE ZIP	
PREVIOUS ADDRESS		APT #	
CITY		STATE ZIP	
X EMERGENCY CONTACT		X EMERGENCY CONTACT PHONE	

The undersigned hereby makes application to Elkhorn Light & Water subject to its rates, rules and regulations.

X	X
SIGNATURE	SOCIAL SECURITY NO. OR TAX ID

* OFFICE USE BELOW *

FOR CUSTOMER MOVING OUT

NAME(S) ON ACCOUNT		PRIMARY PHONE		ACCOUNT NUMBER	
C/O		SECONDARY PHONE		DATE REQUESTED-MOVE OUT	
SERVICE ADDRESS		APT #		READING DATE	
FORWARDING ADDRESS		APT #		ELECTRIC METER READ	
CITY		STATE ZIP		WATER METER READ	
REMARKS:		INITIAL MOVE OUT _____		DRAFT CURRENT ____/____/____	
				DRAFT FINAL ____/____/____	
				Electric #1 : Active/Inactive FP : Active/Inactive	
				Electric #2 : Active/Inactive PB : Active/Inactive	
				Water : Active/Inactive	
				Sewer : Active/Inactive EDISC/WDISC	
				Gar/Rec : Active/Inactive FCA: DELETE	
FORECLOSURE/ WATER REMOVAL DATE ____/____/____				Security Lights/Other :	

- ☐ MANUAL FINAL/LL COPY

☐ LANDLORD PAPERWORK

☐ EMAIL BILL

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 servi

CUSTOMER SIGNATURE	DATE	ACCEPTED BY: (ELKHORN L & W REPRESENTATIVE)
--------------------	------	---

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 # | <input type="checkbox"/> Have the ground around your home and along the service route within 6 inches of final grade |
| <input type="checkbox"/> Locate, mark or expose any buried obstruction or underground facilities - such as underground lighting - with stakes, spray, or flags. | <input type="checkbox"/> Appropriate statement or inspection form for electric utility required before meter(s) can be set |
| 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. | <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. |
| <input type="checkbox"/> Recorded copy of certified survey map | <input type="checkbox"/> Payment of bill |
| <input type="checkbox"/> Building site sketch showing existing and future decks, pool, etc. plus the electric meter location with measurements | <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

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 or 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, Terry Weter (262-723-2223), or the City Engineer, Gary Welsh (262-723-8110), must be contacted to discuss grades and construction information. An inspection must be done before excavating or pouring concrete.

As of April 26, 2006

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:

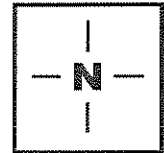
1. Complete this plan by filling in requested information, completing the site diagram and marking appropriate boxes on the inside of this form.
2. In completing the site diagram, give consideration to potential erosion that may occur before, during, and after grading. Water runoff patterns can change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

PROJECT LOCATION _____

BUILDER _____ OWNER _____

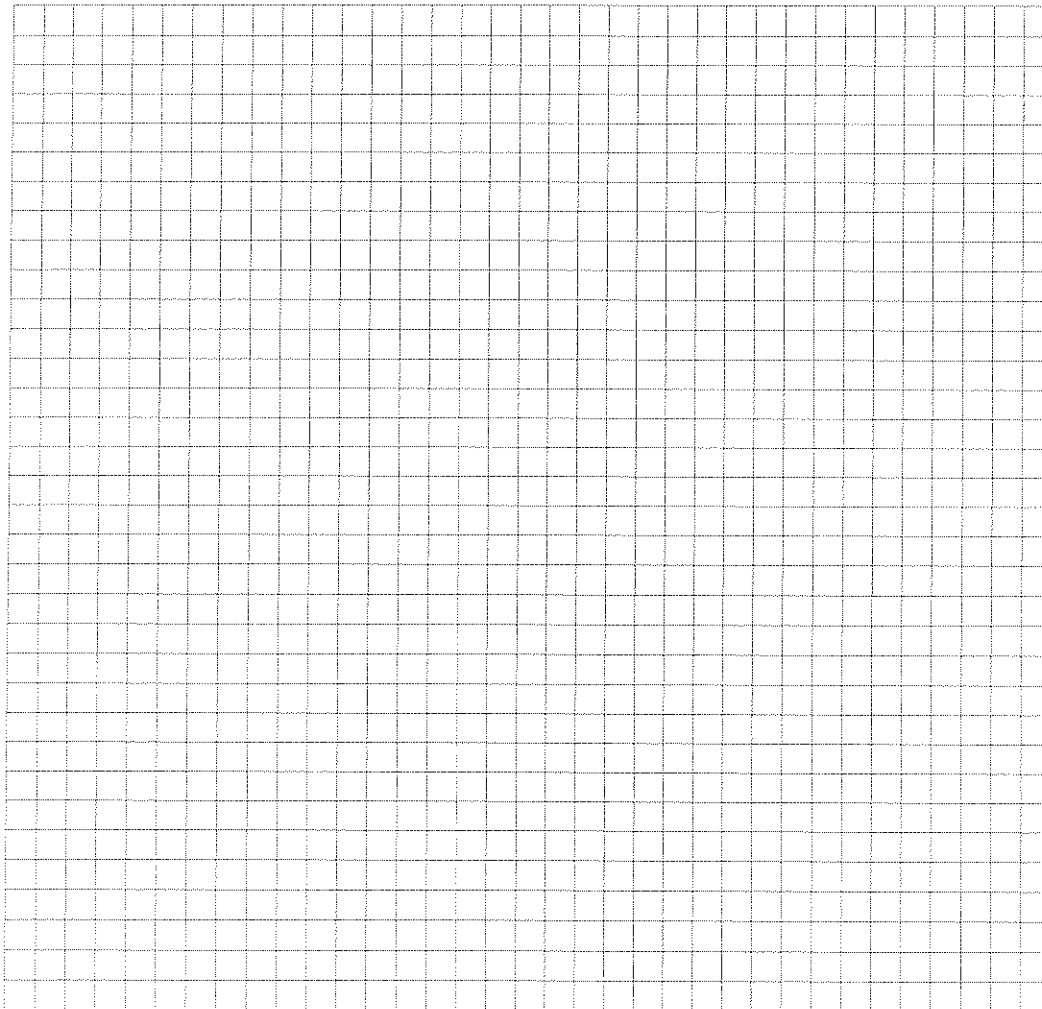
WORKSHEET COMPLETED BY _____ DATE _____

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>

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.



UW
Extension

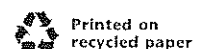
©1999 by the Board of Regents of the University of Wisconsin System. Send inquiries about copyright permission to: Cooperative Extension Publications, 432 North Lake Street, Madison, WI 53706. University of Wisconsin-Extension is an EEO/Affirmative Action employer and provides equal opportunities in employment and programming, including Title IX and ADA requirements.

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

DNR WT-458-96

R-03-02-2M-10-S

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



WALCOMET CONNECTION APPLICATION

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

Wisconsin Division of Safety and Buildings Wisconsin Stats. 101.63, 101.73		WISCONSIN UNIFORM BUILDING PERMIT APPLICATION				Application No. _____ Parcel No. _____	
PERMIT REQUESTED		Constr. HVAC Electric Plumbing Erosion Control Other:					
Owner's Name		Mailing Address				Tel.	
Contractor Name & Type		Lic/Cert#		Mailing Address		Tel. & Fax	
Dwelling Contractor (Constr.)							
Dwelling Contr. Qualifier				The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.			
HVAC							
Electrical							
Plumbing							
PROJECT LOCATION		Lot area Sq.ft.	One acre or more of soil will be disturbed	_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E (or) W			
Building Address		Subdivision Name			Lot No.		Block No.
Zoning District(s)		Zoning Permit No.		Setbacks:	Front ft.	Rear ft.	Left ft. Right ft.
1. PROJECT		3. OCCUPANCY		6. ELECTRIC		9. HVAC EQUIP.	
New Repair Alteration Raze Addition Move Other:		Single Family Two Family Garage Other:		Entrance Panel Amps: _____ Underground Overhead		Furnace Radiant Basebd Heat Pump Boiler Central AC <input type="checkbox"/> Fireplace Other:	
2. AREA INVOLVED (sq ft)		4. CONST. TYPE		7. WALLS		12. ENERGY SOURCE	
	Unit 1	Unit 2	Total	Site-Built Mfd. per WI UDC Mfd. per US HUD	Wood Frame Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:	Fuel Nat Gas LP Oil Elec Solid Solar Space Htg <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Water Htg <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Unfin. Bsmt				5. STORIES 1-Story 2-Story Other: Plus Basement	8. USE Seasonal Permanent Other:	10. SEWER Municipal Sanitary Permit# _____ 11. WATER Municipal On-Site Well	
Living Area							
Garage							
Deck							
Totals						13. HEAT LOSS _____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)	
14. EST. BUILDING COST w/o LAND \$ _____							
I understand that I am subject to all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply.							
APPLICANT (Print): _____ Sign: _____ DATE _____							
APPROVAL CONDITIONS		This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. See attached for conditions of approval.					
ISSUING JURISDICTION		Town of Village of City of County of State→			State-Contracted Inspection Agency#:		Municipality Number of Dwelling Location _____ - _____
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:	
Plan Review	\$ _____	Construction				Name _____	
Inspection	\$ _____	HVAC				Date _____ Tel. _____	
Wis. Permit Seal	\$ _____	Electrical				Cert No. _____	
Other	\$ _____	Plumbing					
Total	\$ _____	Erosion Control					

SBD-5823(R.10/08) Distribute: Ply 1 – Issuing Jurisdiction; Ply 2- Issuer forwards to State w/in 30 days; Ply 3- Inspector; Ply 4- Applicant

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

(Part of Ply 4 for Applicants)

Cautionary Statement To Owners Obtaining Building Permits

101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:

If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two- family dwelling code 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 any negligence by the contractor that occurs in connection with the work performed under the building permit.

Additional Responsibilities for Owners of Projects Disturbing One or More Acre of Soil

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

Owner's Signature: _____ Date: _____

Call: (262) 723-2223 ILHR 20-06(a)3	UNIFORM EROSION CONTROL PERMIT APPLICATION	APPLICATION NO. TAX KEY #
---	--	--------------------------------------

ISSUING MUNICIPALITY	CITY OF ELKHORN	PROJECT LOCATION	
		PROJECT DESCRIPTION	

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 _____	<input type="checkbox"/> Construction _____ <input type="checkbox"/> HVAC _____ <input type="checkbox"/> Electrical _____ <input type="checkbox"/> Plumbing _____ <input type="checkbox"/> 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

TYPE OF SERVICE	<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 <input type="checkbox"/> Overhead
	<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