

TOWN OF PLYMOUTH

120 Suhrke Rd Plymouth, WI 53073 920-893-5713 clerk@townofplymouth.wi.gov

LOCATION _____ **PERMIT #** PLY

Electrical - Plumbing - HVAC Permit Applications

Electrical Permit: Company _____ Phone # _____

New Service	OH	UG	
Service Change	OH	UG	OH to UG
All Service	Volts/Amps _____		
	Number of Meters _____		
	Service Utility _____		
	Service Only _____		
Remodel	Location in Building _____		
Outbuilding	_____		
Alternative Energy Installation	_____		

Signature of Licensed Electrician _____ **License #** _____

Plumbing Permit: Company _____ Phone # _____

_____ Floor Drains	_____ Sump Pump	_____ Sinks	
	_____ Hose		
_____ Dishwasher	_____ Bibs	_____ Lavs	
_____ Showers	_____ Water Softener	_____ Bath Tubs	
_____ Garbage Disposal	_____ Other	_____ Water Closets	
_____ Bar Connection	_____ Other	_____ Laundry Tubs	

ALL TESTS ON ROUGH INSTALLATIONS AS PER WISCONSIN PLUMBING CODE ALL INFORMATION ON THIS PERMIT. IS PURSUANT TO THE WISCONSIN STATUTE 145.06(1)(A), STATING THAT THE PLUMBING WORK MUST BE PERFORMED BY A CONTRACTING MASTER PLUMBER. The applicant agrees to comply with the Wisconsin Uniform Dwelling Code and other Municipal Ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, expressed or implied on the Department or Municipality, certifies that all the information is accurate. I the undersigned hereby applies for a permit for the execution and of Installation of Plumbing as herein described.

Signature of Master Plumber _____ **License #** _____

HVAC Permit: Company _____ Phone # _____

_____ New Boiler	_____ Fireplace or Wood Burner	
_____ New Furnace	_____ Replacement of Equipment	
_____ Unit Heater(s) _____	_____ Air Conditioning	
_____ Roof Top Unit(s) _____	_____ Ventilation _____	
_____ Additional to existing system	_____ Other _____	

Description of Work _____

Type of Fuel _____

Calculated BTU Heat Loss _____

Size of Unit (BTU Rating) _____ Output _____ Input _____

The undersigned certifies that all of the above information is correct, and applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions set forth herein; and it is further agreed that such work will be done in strict compliance with the Heating and Ventilating ordinance of the Town of Plymouth and the State Heating and Ventilation Code of Wisconsin; and to obey any and all lawful orders of the inspection of heating and ventilating.

Signature of HVAC contractor _____ **License #** _____

For Office Use Only

Rev. 1-25 Date Received _____ Paid \$ _____ Check # _____ Cash _____

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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 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.

You are hereby advised that owner, as defined in 101.01(2)e of Wisconsin State Statutes is responsible for all code requirements not specifically cited herein.

The applicant(Property Owner or Contractor) agrees to comply with the Wisconsin Uniform Dwelling Code, Wisconsin Enrolled Commercial Building Code, and all other applicable codes and municipal ordinances and with the conditions of this permit. The Applicant understands that the issuance of the permit creates no legal liability, express or implied, on the Inspection Agency or municipality and certifies that the information is accurate. The Applicant agrees to allow the building inspection and assessing to access the property for the inspection of this permit. Applicant is responsible for calling and scheduling all inspections to close out the permit once work is complete.

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608) 261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance.

Permit Fees will double if work is started before permits are issued

Please make sure the application is filled out completely. Incomplete application will cause delays.

It is the Applicant's responsibility to know where the lot lines are.

I, hereby, certify that all of the supplied information and attachments submitted are true and correct to the best of my knowledge and belief. I agree to the terms of this permit application.

Signature of Property Owner _____
or

Date _____

Signature of Contractor _____

Date _____

Building permits are good for one (1) year. Should applicants wish to renew such building permit at the end of one (1) year, applicant must make a new application and pay the application fee. All application fees are non-refundable.

Office Use Only

Approved ☐

Denied ☐

Date _____

Notes, Conditions, Restrictions _____

Administrator
Signature _____

Building Inspector
Signature _____

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PLAN AHEAD ... For new buildings, additions, garages, storage sheds or any other type of outbuilding you are required to have Sheboygan County Planning approval first before the Town can issue any building permits. Sheboygan County Planning phone number is 920-459-3060.

*Attach plans, site drawing, including measurements and distances, of the property including, but not limited to size location of existing buildings and proposed changes or additions. It is the Applicant's responsibility to know where the lot lines are.

Size of Building: Width: _____ Length: _____ Height: _____

Setbacks for Property Lines: Front(Center of Road)_____ft. Rear_____ft. Side_____ft. Side_____ft.

PLOT MAP

Rear Lot Line

L
o
t

L
i
n
e

L
o
t

L
i
n
e

Front Lot line

Right of Way

Street Name

For Office Use Only