



City of Kenosha
Department of Neighborhood Services and Inspections
625 52nd Street, Room 100, Kenosha, WI 53140
Phone: 262.653.4263, Fax: 262.653.4254

**APPLICATION PACKET
FOR
INSTITUTIONAL ADDITION PERMIT**

Project Address _____

The following items must be completed and submitted as a packet:

- _____ Institutional Addition permit application
- _____ Occupancy Commercial permit application (for building shell)
- _____ Erosion Control Commercial permit application with:
 - _____ Notice of Intent (NOI) from the Department of Natural Resources (one or more acre)
 - _____ Two (2) sets of erosion control plans (civil drawings)
- _____ Business Occupancy permit application
- _____ Two (2) certified surveys
- _____ One (1) set of plans (State-approved, if applicable; i.e., if the existing building plus the addition are over 50,000 cubic feet)
 - _____ One (1) additional set of plans in pdf format (e-mail to grohde@kenosha.org)
- _____ One (1) copy of State approval letter (if applicable)
- _____ Cautionary Statement (required if the property owner is listed as the contractor); **OR**
State Licensing (required if a contractor is listed)
- _____ City Development Authorization: _____

Note: You will be notified when your permits are ready; please do not submit payment with permit applications.

Office Use Only:



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APPLICATION FOR INSTITUTIONAL ADDITION PERMIT

This document must be legible or will be returned.

Project Address _____

Project Name _____

*Contractor _____

Mailing Address _____

Mailing Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone (_____) _____

Phone (_____) _____

Contractor e-mail _____

*Note to Contractor: Please see attached "State Licensing Requirements."

Estimated Cost (excluding plumbing, electric, and HVAC) _____

Business Name _____

Area _____

Construction Class _____

Height _____

Sprinklered: Yes _____ No _____

For Office Use Only: Plan File # _____ Zoning _____ Review Chapter _____

I agree to comply with 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 I am an owner applying for an erosion control or construction permit, I have read and signed the attached cautionary statement. 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.

Applicant Signature: _____

Table with 6 columns: DESCRIPTION, PRICE PER UNIT, QTY, PLAN REVIEW SQUARE FEET, FEE, QTY. Rows include NEW BUILDINGS, MINIMUM FEE, FIRE PREVENTION, BUREAU INSPECTION, and PLAN REVIEW categories.



State of Wisconsin Licensing Requirements for Contractors:

General Contractors of One- or Two-family Dwellings:

Any general contractor that performs work on a one- or two-family dwelling must possess the following two licenses:

- 1) Dwelling Contractor Number: _____ Signature of Designee: _____
- 2) Dwelling Qualifier Number: _____
- Dwelling Qualifier Licensee Signature: _____ Print Name: _____

General Contractors of Multi-family Dwellings or Commercial Projects:

Any general contractor that performs work on a multi-family dwelling or commercial property must possess the above two licenses **OR**:

- Building Contractor
 Registration (BCR) Number: _____ Signature of Designee: _____

Contractors of Exterior Sewer and Water Laterals or Interior Plumbing Projects:

Any contractor that performs Exterior Sewer and Water Lateral or interior plumbing work must possess the following two licenses:

- 1) Wisconsin Master Plumber's License Number: _____
- Licensee's Signature: _____ Print Name: _____
- 2) Building Contractor
 Registration (BCR) Number: _____ Signature of Designee: _____

Contractors of Electrical Projects:

Any contractor that performs electrical work must possess the following two licenses:

- 1) Wisconsin Master Electrician's License Number: _____
- Licensee's Signature: _____ Print Name: _____
- 2) Wisconsin Electrical
 Contractor Certification Number: _____ Signature of Designee: _____
- OR**
 Building Contractor Registration (BCR) Number: _____ Signature of Designee: _____

Contractors of HVAC Projects:

Any contractor that performs HVAC work must possess the following two licenses:

- | | | |
|---|--------------------------------|----------------------|
| 1) Wisconsin HVAC
Qualifier Number: _____ | Licensee's
Signature: _____ | Print
Name: _____ |
| OR
City of Kenosha
HVAC License: _____ | Licensee's
Signature: _____ | Print
Name: _____ |
| 2) Wisconsin HVAC
Contractor Certification Number: _____ Signature of Designee: _____ | | |
| OR
Building Contractor
Registration (BCR) Number: _____ Signature of Designee: _____ | | |

Note to Property Owners:

If the owner of the property is listed as the general contractor, a license is not required; however, the attached "Cautionary Statement" must be signed by the property owner.

CITY OF KENOSHA
Department of Neighborhood Services and Inspections

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.

**CAUTIONARY STATEMENT TO CONTRACTORS FOR
PROJECTS INVOLVING BUILDING BUILT BEFORE 1978**

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs six (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 <http://dhs.wisconsin.gov/lead/WisconsinRRPRule.htm> for details of how to be in compliance.

WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

**ADDITIONAL RESPONSIBILITIES FOR
OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE(S) 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: _____



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**OCCUPANCY CHECKLIST
 FOR COMMERCIAL, INSTITUTIONAL, MANUFACTURING, AND MULTI-FAMILY
 NEW CONSTRUCTION AND ADDITIONS**

Note: This form must be presented to the building inspector at the time of final inspection.

The purpose of the occupancy checklist is to insure that all work and conditions necessary to obtain a Certificate of Occupancy (CO) have been completed. Upon issuance of the permit, this occupancy checklist shall be affixed to the interior of the front door of the building. Prior to the scheduling of the final inspection with the building inspector, the box adjacent to each listed code requirement must be checked, thereby signifying it has been completed; and, the checklist must be signed at the bottom. If these procedures are not followed, the final inspection will not be conducted; and, a reinspection fee will be assessed.

Address of Property

Required Department Approvals:

- City Development approval received
- Assessor Office approval received
- Fire Prevention Bureau approval received
- Kenosha Water Utility approval received
- Public Works approval received
- Parks approval received
- Zoning approval received
- Storm Water Utility approval received

Site Conditions:

- Soil stockpiles removed from site
- Site stabilized with seed/sod or erosion control matting
- Site graded to meet approved grading plan
- Temporary erosion control measures removed

Required Construction Approvals:

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Plumbing signed off on inspection card <input type="checkbox"/> Erosion Control signed off on inspection card <input type="checkbox"/> Structural Compliance Statement submitted <input type="checkbox"/> HVAC Compliance Statement submitted <input type="checkbox"/> Moisture control, weep holes provided, sealants and caulking <input type="checkbox"/> Draftstopping/Firestopping <input type="checkbox"/> Floor/wall/ceiling finishes <input type="checkbox"/> Exit door installation, width, swing, hardware, landings <input type="checkbox"/> Smoke and heat vents <input type="checkbox"/> Stair tread, riser, handrail-handgrip dimensions, intermediate rails and openings | <ul style="list-style-type: none"> <input type="checkbox"/> Electric signed off on inspection card <input type="checkbox"/> Health Department signed off on inspection card (if applicable) <input type="checkbox"/> HVAC air balance test and report submitted <input type="checkbox"/> Penetrations in rated assemblies <input type="checkbox"/> Rated fixtures in rated ceiling/roof assemblies <input type="checkbox"/> Damper access panels <input type="checkbox"/> Safety glazing and guarding on windows and doors <input type="checkbox"/> Exit lights <input type="checkbox"/> Foam plastic protection <input type="checkbox"/> ADA parking spaces/ramps/signage |
|---|--|

I verify that, to the best of my knowledge, all of the above items have been installed and completed in compliance with all applicable codes and ordinances as required by the City of Kenosha. I also understand that if this checklist is not posted at the time of inspection, the inspection will not be conducted; and, a reinspection fee shall be assessed.

Contractor/Owner

Date