

APPLICATION FOR COMMUNICATION TOWER COVER SHEET

Proje	ct Address	

Please o	complete and submit the following as a packet:	This box for DCI use:
1	_ Communication Tower permit application	
2	 Occupancy Commercial permit application (for building shell) 	
3	Erosion Control Commercial permit application (signed by property owner), along with:	
	Water Resources Application for Project Permits (WRAPP) from the Department of Natural Resources (one or more acre)	
	One (1) set of erosion control plans (civil drawings). (Please contact the Soil Erosion Specialist at 262.653.4247 with questions.)	
4	Low Voltage permit application for antennas	
5	Commercial Electrical Permit for electrical connections	
6	Fence Permit Application (if applicable)	
7	_ Two (2) certified surveys or two (2) engineered site plans	Comments:
8	Required Plans:	
	Please check with the Department of City Inspections regarding plan review and submittal All plans must be designed and stamped by an architect or designer, drawn at 1/4" scale. Please include a set of plans in pdf format (you may email them to bldgpermits@kenosha.org) or flash drive.	



FOR OFFICE USE ONLY
Date
Permit #
Needs Approval
IP
Fee'd

APPLICATION FOR COMMUNICATION TOWER PERMIT Form #DCI158 (rev. 01/20)

Please Print Name_____

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

Project (Business) Name Project Owner	Project Address				····
Mailing Address Mailing Address City State Zip City State Zip Phone () Phone () Phone () Phone () Phone () Phone ()	Project (Business) Name				
Mailing Address Mailing Address City State Zip City State Zip Phone () Phone () Phone () Phone () Phone () Phone ()	Project Owner		Contractor		· · · · · · · · · · · · · · · · · · ·
Phone () Owner's email Contractor e-mail Project Contact Person Phone () ► Estimated Cost Setbacks: Front Rear Left Right Height Size by Square Feet DESCRIPTION FEE QUANTITY CELL TOWER \$ 430.00 Per Unit ZONING REVIEW FEE \$ 60.00 If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project					
Owner's email Contractor e-mail Project Contact Person Phone () ► Estimated Cost Setbacks: Front Rear Left Right Height Size by Square Feet DESCRIPTION FEE QUANTITY CELL TOWER \$ 430.00 Per Unit ZONING REVIEW FEE \$ 60.00 If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project	City State	Zip	City	State	Zip
Project Contact Person Phone (Phone ()		Phone ()	· · · · · · · · · · · · · · · · · · ·
Setbacks: Front Rear Left Right Height Size by Square Feet DESCRIPTION FEE QUANTITY CELL TOWER \$ 430.00 Per Unit Solution	Owner's email		Contractor e-mai	l	
Setbacks: Front Rear Left Right Height by Square Feet Size by Square Feet DESCRIPTION FEE QUANTITY CELL TOWER \$ 430.00 Per Unit Square Feet If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project	Project Contact Person		Phone (_)	
Height	→ Estimated Cost				
DESCRIPTION FEE QUANTITY CELL TOWER ZONING REVIEW FEE \$ 430.00 Per Unit \$ 60.00 If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project				Right	
CELL TOWER ZONING REVIEW FEE \$ 430.00 Per Unit \$ 60.00 If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapte of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project	Size by	S	Square Feet		
ZONING REVIEW FEE \$ 60.00 If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapte of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project	DESCRIPTION	FEE		QUANT	ITY
of the Code of General Ordinances. If at any time during or after the approval process you determine that you will not proceed with this project			· Unit		
review fees will be charged. Any/all unpaid permit fees, along with an additional \$100.00 Administrative Fee, will be processed as a special charge against the real estate upon which the service was performed.	of the Code of General Ordinances If at any time during or after the a please contact our office at 262.653 review fees will be charged. Any/all	pproval process yo 4263 to avoid paying unpaid permit fees, a	ou determine that you g the entire cost of the along with an addition	u will not proceed with permit. Administrative al \$100.00 Administrati	h this project, e and/or plan
I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the iss of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all of the permit information he accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for who permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done. Applicant Signature Date	I agree to comply with all applicable codes, of the permit creates no legal liability, expres accurate. I expressly grant the building in permit is sought at all reasonable hours and	statutes, and ordinancess or implied, on the sta	res, and with the condition ate or municipality; and, for's authorized agent, per to inspect the work whi	ons of this permit; unders certify that all of the perm permission to enter the p ich is being done.	nit information herein is



FOR OFFICE USE ONLY
Date
Permit #
Needs Approval
IP
Fee'd

APPLICATION FOR OCCUPANCY – NEW BUILDING (SHELL ONLY)* Form #DCI115 (rev. 01/20)

*For Commercial, Institutional, Manufacturing, and	Multi-family
Project Address	
Project Name	
Intended (Business) Use	
Business Owner	Contractor
Mailing Address	Mailing Address
CityState Zip	City StateZip
Phone ()	Phone ()
Zoning Number of Units (if ap	plicable)
DESCRIPTION FEE	QUANTITY
Commercial New Building \$ 240.00 Multi-family New Building \$ 180.00 plus multi-family per unit fee \$ 48.00 per Fire Prevention Bureau Inspection \$ 72.00 Ea.0	
cost of the permit. Administrative and/or plan review fe	on: contact our office at 262.653.4263 to avoid paying the entire es will be charged. Any/all unpaid permit fees, along with an ed as a special charge against the real estate upon which the
Applicant Signature	Date
Please Print Name	



FOR OFFICE USE ONLY
Date
Permit #
Needs Approval
IP
Fee'd

APPLICATION FOR EROSION CONTROL PERMIT (COMMERCIAL) Form #DCI142 (rev. 01/20)

IMPORTANT: After erosion control measures are installed according to the approved plan, you are required to call the Soil Erosion Specialist at 262.653.4247 to schedule an inspection.

Reminder: <u>Erosion Control Plans</u> required to be submitt	that meet the requiremer ed with this application	nts of Chapter 33.11 of the	Code of General (Ordinances are
Project Address		Project Name		
Property Owner		Contractor		
Mailing Address		Mailing Address		
City 5		City	State	Zip
Phone ()		Phone()		
Property Owner E-mail Address		Contractor E-mail Add	ress	
	eet)			
Trenching: Linear Feet	Grading	or Site Stripping: Square	Feet	
Shoreland/Wetland Affected	Anticipa	ited Completion Date:		
DESCRIPTION PLAN REVIEW - Commercial BASE FEE SQUARE FOOT CHARGE ESCROW (More than one acre) If work is started without first obta the Code of General Ordinances.	\$ 200.00 \$ 200.00 \$5.00 per 1,00 \$5,000.00	00 Sq. Ft. (\$2,000.00 max.) y fee will be charged in a)	
v	VETLANDS NOTICE TO	PERMIT APPLICANTS		
You are responsible for com	olving with state and fed	deral laws concerning the	e construction nea	ar or on

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.

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 of the permit information herein is accurate. 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.

→	Property Owner's Signature	Date
	Please Print Name	



FOR OFFICE USE ONLY
Date
Permit #
Needs Approval
IP
Fee'd

of

APPLICATION FOR LOW VOLTAGE PERMIT* Form #DCI114 (rev. 01/20)

1 01111 113 011 14 (101. 0 1120)		
*Required for Commercial Projects Only		
Project Address	_	
Project Name	_	
Property Owner	Contractor	
Mailing Address		
City State Zip		
Phone ()		
\ <u>\</u>	Contractor email	
→ Estimated Cost		
Description of Work / Comments		
DESCRIPTION	PRICE PER UNIT	QTY
LOW VOLTAGE PER ITEM (ie, card reader, key pad,		
REX, speakers, signaling device, antenna)	\$2.00 each	
LOW VOLTAGE CABLE	\$0.01 per If	
OUTDOOR/INDOOR CAMERAS	\$0.50 each	
MINIMUM FEE	\$75.00	
If work is started without first obtaining a permit, a pethe Code of General Ordinances.	nalty fee will be charged in accor	dance with Chapter 9.070
If at any time during or after the approval process you determing office at 262.653.4263 to avoid paying the entire cost of the permit permit fees, along with an additional \$100.00 Administrative Fee, we the service was performed.	Administrative and/or plan review fees w	ill be charged. Any/all unpaid
I agree to comply with all applicable codes, statutes, and ordinance the permit creates no legal liability, express or implied, on the state accurate. I expressly grant the building inspector, or the inspector's is sought at all reasonable hours and for any proper purpose to inspect	te or municipality; and, certify that all of s authorized agent, permission to enter th	the permit information herein is
Applicant Signature	Date	
Please Print Name		

IT IS THE CONTRACTOR'S RESPONSIBILITY TO CALL FOR INSPECTIONS ONCE PROJECT IS COMPLETE.



FOR OFFICE USE ONLY
Date
Permit #
Needs Approval
IP
Fee'd

APPLICATION FOR COMMERCIAL ELECTRIC PERMIT Form #DCI105 (REV. 01/20)

Form #DCI105 (REV. 01/20)				
You will be notified when your perr	nit is ready; ple	ease do not submit payment with	<u>h permit applica</u>	<u>ition</u> .
Project Address		Suite		
Project Name		Contractor		
Mailing Address		Mailing Address		
City State Zip		City		
Phone ()		Phone ()		
→ Estimated Cost		Contractor e-mail		
Description of Work				
CHECK ONE: New Building Existing			(3 or more unit	*
If at any time during or after the approval process y office at 262.653.4263 to avoid paying the entire cost of permit fees, along with an additional \$100.00 Administrative service was performed. IT IS THE ELECTRICAL CONTRACTOR'S RESERVED.	of the permit. Active Fee, will be PONSIBILITY	dministrative and/or plan review fee processed as a special charge a	es will be charged gainst the real es	d. Any/all unpaid
Please indicate quantities of each item belo		NEW MULTI FAMILY OF CUIT DELIAS		#450.00 man III
0-1200 AMP SERVICE Size OH or UG 1200+ AMP SERVICE Size OH or UG	\$ 90.00 Ea. \$ 210.00 Ea.	NEW MULTI-FAMILY or GUT REHAE WIREWAYS/BUSWAYS/RACEWAYS		\$150.00 per Ur \$1.00 If
Additional PanelsPanel boardTransformer	\$ 36.00 Ea.	TEMPORARY SERVICE Size (Job trailers, etc.)		\$ 90.00 Ea.
GENERATOR, TRANSFORMER, REACTOR, ELECTRIC FURNACE, RECTIFIER, CAPACITOR, WELDER	\$1.00 per kw	X-RAY MACHINE		\$20.00 Ea.
ELECTRIC MOTOR	\$1.00 per hp	ELEVATOR WIRING		\$50.00 per car
DIMMER SWITCH	\$4.00 Ea.	SOLAR/WIND SYSTEMS		\$5.00 per kw
EXIT/EM LIGHT	\$5.00 Ea.	PER OPENING (Switches, outlets, e	tc.)	\$1.00 Ea.
CIRCUIT BREAKERS/ FUSES (no new panel)	\$ 6.00 Ea.	FUEL PUMPS		\$25.00 Ea.
LED/FLUORESCENT FIXTURES	\$2.00 Ea.	TRENCHING, CABLE TRAY, FLOOF	₹ DUCT	\$.06 Per Ft.
GAS FURNACE CONNECTION	\$20.00 Ea.	SUBSTATION WIRING		\$ 240.00 Ea.
AC UNITS/REF. COOLERS	\$25.00 Ea.	MINIMUM COMMERCIAL FEE		\$ 75.00 Ea.
SERVICE RE-CONNECT	\$75.00	PLAN REVIEW – ELECTRIC		\$ 120.00 Ea.
PLAN REVIEW – ZONING (service upgrades for multi-fami	ly)\$60.0	00 Ea. Approved by		
Note: Please use the Sign Permit application for sign of the Code of General Ordinances.		fee will be charged in accorda	ınce with Chap	oter 9.07C of
Any contractor that performs electrical work r	nust possess	the following two licenses:		
1) Wisconsin Master Electrician's License numb	oer			
2) Wisconsin Electrical Contractor License num	ber			
Licenses are available through the Departmer	nt of Safety &	Professional Services (DSPS)) at: dsps.wi.ge	ov
I agree to comply with all applicable codes, statutes, and ordincreates no legal liability, express or implied, on the state or me the building inspector, or the inspector's authorized agent, per any proper purpose to inspect the work which is being done.	unicipality; and, ce	ertify that all of the permit information he	erein is accurate. I	expressly grant
Master Electrician's Signature		Date_		
Please Print Name				