

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

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

1. \_\_\_\_\_ Residential Addition permit application
2. \_\_\_\_\_ Occupancy Residential permit application
3. \_\_\_\_\_ Erosion Control Residential permit application (signed by property owner). Note: Please contact the Soil Erosion Specialist, at 262.653.4247 with questions)
4. \_\_\_\_\_ Residential Plumbing permit application (signed by a Wisconsin-licensed Master Plumber)
5. \_\_\_\_\_ Residential Electrical permit application (signed by a Wisconsin-licensed Master Electrician)
6. \_\_\_\_\_ Residential HVAC permit application (signed by an individual that possesses a City of Kenosha HVAC license **OR** a State of Wisconsin HVAC Qualifier license)
7. \_\_\_\_\_ Certificate of Compliance for Residential Additions
8. \_\_\_\_\_ Heat loss calculations for entire dwelling **or** letter from HVAC contractor which states the existing furnace is sufficient to heat the addition
9. \_\_\_\_\_ One (1) NEW property survey (see attached survey requirements) with erosion control measures shown, and elevations shown every twenty-five feet (25') along each property line [in accordance with 33.04(A)(b) and 33.10(D)(6)]
10. \_\_\_\_\_ One (1) set of floor plans (size 8 1/2" x 11" or 11" x 17", drawn at 1/4" scale), showing door and window sizes, and hallway and room dimensions
11. \_\_\_\_\_ One (1) set of cross-section drawings (size 8 1/2" x 11" or 11" x 17", drawn at 1/4" scale), showing structural members, insulation, exterior siding, and interior wall finish
12. \_\_\_\_\_ Cautionary Statement (required if the property owner is listed as the general contractor)

**If at any time during or after the approval process you determine that you will not proceed with this project**, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan 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.



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

**APPLICATION FOR RESIDENTIAL ADDITION PERMIT**  
**Form #DCI123 (rev. 02/20)**

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

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

Property Owner \_\_\_\_\_ Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_ Mailing Address \_\_\_\_\_

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

Phone (\_\_\_\_\_) \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Contractor e-mail \_\_\_\_\_

➔ **Estimated Cost** (excluding plumbing, electric, and HVAC) \_\_\_\_\_

Square Feet \_\_\_\_\_ Height \_\_\_\_\_

Type of Addition \_\_\_\_\_

Type of Use: Single-family \_\_\_\_\_ Two-family \_\_\_\_\_

Will the work include the addition of a kitchen? Yes \_\_\_\_\_ No \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side \_\_\_\_\_

<b>For Office Use Only:</b> Zoning: _____ Zoning Review/Approval: _____
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<p><b>Any general contractor* that performs work on a one- or two-family dwelling must possess the following two licenses:</b></p> <p>1) Dwelling Contractor Certification number: _____</p> <p>2) Dwelling Contractor Qualifier Certification number: _____</p>
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DESCRIPTION	FEE	QUANTITY
PLAN REVIEW - RESIDENTIAL	\$ 60.00 Ea.	_____
NEW (1&2 FAMILY) STRUCTURAL	\$ .50 Per Sq. Ft.	_____
MINIMUM FEE	\$ 120.00 Ea.	_____
ZONING PLAN REVIEW	\$ 60.00 Ea.	_____

**If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances**

*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.*

**Dwelling Contractor Qualifier Licensee Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Print Name** \_\_\_\_\_

**\*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.

## 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 BUILDINGS BUILT BEFORE 1978

If this project is in a dwelling or child-occupied facility, built before 1978, then the requirements of Ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. For details of how to be in compliance, go to <http://dhs.wisconsin.gov/lead/renovationrules.htm>.



*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. If I am the property owner applying for an erosion control or construction permit, I have read and signed the above 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.*

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 (of a single-family or two-family dwelling) without a Dwelling Contractor Certification and have read this Cautionary Statement regarding contractor responsibility. (**Note:** This form is not required for general contractors of multi-family or commercial buildings).

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

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name \_\_\_\_\_



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

**APPLICATION FOR RESIDENTIAL OCCUPANCY PERMIT**  
**Form #DCI117 (rev 01/20)**

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

Lot Number \_\_\_\_\_

Property Owner \_\_\_\_\_

Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

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

Phone (\_\_\_\_\_) \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Zoning \_\_\_\_\_  
*(office use only)*

Intended Use \_\_\_\_\_

Additional Comments \_\_\_\_\_

DESCRIPTION	FEE	QUANTITY
One-family Occupancy	\$ 120.00	_____
Two-family Occupancy	\$ 120.00 ea. unit	_____
Multi-family Occupancy plus	\$ 180.00	_____
multi-family per unit fee	\$ 48.00 per unit	_____

**If building is occupied prior to the issuance of this permit, a penalty fee will be charged in accordance with Chapter 8.04F of the City of Kenosha Zoning Ordinance**

**If at any time during or after the approval process you determine that you will not proceed with this project,** please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan 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.

**Applicant Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Please print name** \_\_\_\_\_



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

**APPLICATION FOR EROSION CONTROL PERMIT (RESIDENTIAL)**  
**Form #DCI132 (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.**

Project Address _____	Lot # (for new buildings) _____
Property Owner _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone (_____) _____
Property Owner E-mail Address _____	Contractor E-mail Address _____

Project Contact Person _____
Phone (_____) _____ E-mail _____

Total Area to Be Disturbed (square feet) \_\_\_\_\_

Description of Land Disturbing Activity: Excavating: Cubic Yards \_\_\_\_\_ OR Filling: Cubic Yards \_\_\_\_\_

Trenching: Linear Feet \_\_\_\_\_ Grading or Site Stripping: Square Feet \_\_\_\_\_

Anticipated Completion Date: \_\_\_\_\_

DESCRIPTION	FEE	QUANTITY
PLAN REVIEW - Residential	\$ 100.00	_____
BASE FEE	\$ 200.00	_____

**If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances**



**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.

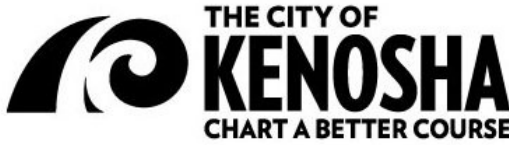
**ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE(S) OF SOIL**

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

*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	_____

**APPLICATION FOR RESIDENTIAL PLUMBING PERMIT**  
**Form #DCI127 (rev. 01/20)**

Project Address _____	Lot # (for new buildings) _____
Owner Name _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone (_____) _____
	Contractor e-mail _____

➔ **Estimated Cost:** \_\_\_\_\_

Description of Work / Comments \_\_\_\_\_

CHECK ONE: One-family \_\_\_\_ Two-family \_\_\_\_ CHECK ONE: New Building \_\_\_\_ Existing \_\_\_\_

*If at any time during or after the approval process you determine that you will not proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan 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.*

**IT IS THE PLUMBING CONTRACOR'S RESPONSIBILITY TO CALL FOR ALL INSPECTIONS.**

DESCRIPTION	FEE	QUANTITY
NEW 1&2 FAMILY PLUMBING	\$ 180.00 Per Dwelling	_____
PER FIXTURE	\$ 11.00 Ea.	_____
ROOF DRAIN	\$ 11.00 Ea.	_____
CATCH BASIN/MANHOLES	\$ 24.00 Ea.	_____
BACKFLOW PREVENTER	\$ 11.00 Ea.	_____
SANITARY EJECTOR	\$ 11.00 Ea.	_____
SUMP PUMP	\$ 11.00 Ea.	_____
GAS OPENING	\$ 11.00 Ea.	_____
INTERIOR SEWER	\$ 30.00 Ea.	_____
WATER HEATER	\$ 18.00 Ea.	_____
CIRCULATION PUMP	\$ 11.00 Ea.	_____
MINI VENT	\$ 36.00 Ea.	_____
MISCELLANEOUS	\$ 12.00 Ea.	_____
MINIMUM RESIDENTIAL PLUMBING	\$ 60.00 Ea.	_____

**If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances**

<p><b>Any contractor that performs plumbing work must possess the following license:</b></p> <p>1) Wisconsin Master Plumber's License number: _____</p> <p><b>Licenses are available through the Department of Safety &amp; Professional Services (DSPS) at: <a href="http://dsps.wi.gov">dsps.wi.gov</a></b></p>
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*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 above 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.*

**Master Plumber's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_



<b>FOR OFFICE USE ONLY</b>	
Date	_____
Permit #	_____
Needs Approval	_____
IP	_____
Fee'd	_____

**APPLICATION FOR RESIDENTIAL ELECTRIC PERMIT**  
**Form #DCI125 (rev. 01/20)**

Project Address _____	Lot # (for new buildings) _____
Property Owner _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone (_____) _____
→ <b>Estimated Cost:</b> _____	Contractor e-mail _____

Description of Work: \_\_\_\_\_

If new service, indicate size \_\_\_\_\_ CHECK ONE: Overhead \_\_\_\_\_ Underground \_\_\_\_\_

City needs to notify WE Energies: Yes \_\_\_ No \_\_\_ CHECK ONE: New Building \_\_\_\_\_ Existing \_\_\_\_\_

CHECK ONE: One-family \_\_\_ Two-family \_\_\_ **Note:** Service upgrades for two-family units require a Zoning approval. You will be notified after approval; please do not submit payment with permit application.  
 Zoning \_\_\_\_\_ Zoning Review/Approval \_\_\_\_\_

*If at any time during or after the approval process you determine that you will not proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan 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.*

**ALL ELECTRICAL INSPECTIONS MUST BE CALLED IN BY THE ELECTRICAL CONTRACTOR.**

DESCRIPTION	FEE	QUANTITY
NEW 1&2 FAMILY - 100 Amp Service	\$ 180.00 Per Dwelling	_____
NEW 1&2 FAMILY - 200 Amp Service	\$ 210.00 Per Dwelling	_____
REHAB/REMODEL – ENTIRE HOME	\$ 180.00	_____
WIRING EXTENSION - (Additions, Basements, Garages)	\$ 60.00 Ea.	_____
SERVICE UPGRADE or PANEL CHANGE	\$ 90.00 Ea. Unit	_____
SERVICE RE-CONNECT	\$ 60.00	_____
INSTALL SOLAR SYSTEM	\$ 90.00	_____
MISCELLANEOUS - (Furnaces, A/C, Garbage Disposals, Appliances, etc.)	\$ 6.00 Ea.	_____
MINIMUM RESIDENTIAL FEE	\$ 60.00	_____
ZONING PLAN REVIEW (for two-family upgrades)	\$ 60.00	_____

**If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances**

<p><b>Any contractor that performs electrical work must possess the following two licenses:</b></p> <p>1) Wisconsin Master Electrician's License number _____</p> <p>2) Wisconsin Electrical Contractor License number _____</p> <p><b>Licenses are available through the Department of Safety &amp; Professional Services (DSPS) at: <a href="http://dsps.wi.gov">dsps.wi.gov</a></b></p>
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*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.*

**Master Electrician's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
**Please Print Name** \_\_\_\_\_



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

**APPLICATION FOR RESIDENTIAL HVAC PERMIT\***  
**Form #DCI126 (rev 02/20)**

**\*For One- and Two-family**

Project Address _____	Lot # (for new construction) _____
Property Owner _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone (_____) _____
→ <b>Estimated Cost</b> _____	Contractor e-mail: _____

Description of Work \_\_\_\_\_

CHECK ONE: One-family \_\_\_\_\_ Two-family \_\_\_\_\_ CHECK ONE: New Building \_\_\_\_\_ Existing \_\_\_\_\_

**Note:** No air conditioning units shall be installed in front of the building.

**If at any time during or after the approval process, you do not intend to proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan 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.**

**IT IS THE HVAC CONTRACTOR'S RESPONSIBILITY TO CALL FOR ALL INSPECTIONS**

DESCRIPTION	FEE	QUANTITY
NEW 1&2 FAMILY HVAC	\$ 180.00 Per Dwelling	_____
FURNACE UP TO 200,000 BTU	\$ 30.00 Ea.	_____
FURNACE WITH A/C	\$ 42.00 Per Unit	_____
VENTILATION FAN	\$ 14.00 Ea.	_____
AIR COND./UP TO 5 TONS	\$ 4.80 Per Ton	_____
FIREPLACE	\$ 36.00 Ea.	_____
MISCELLANEOUS	\$ 14.00 Ea.	_____
MINIMUM RESIDENTIAL	\$ 60.00 Ea.	_____

**If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances**

<p><b><u>Contractors of HVAC Projects must possess the following two licenses:</u></b></p> <p>1) Wisconsin HVAC Qualifier Certification number _____  <b>OR</b> City of Kenosha HVAC License number* _____</p> <p>2) Wisconsin HVAC Contractor Registration number: _____</p> <p><b>Licenses are available through the Department of Safety &amp; Professional Services (DSPS) at <a href="http://dspd.wi.gov">dspd.wi.gov</a></b></p>
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*\*New City of Kenosha Licenses are no longer issued – if you do not currently possess a City License, you will need a State Qualifier Certification.*

*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.*

**Licensee's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please Print Name** \_\_\_\_\_



**Certificate of Compliance for Residential Additions  
In accordance with Section 3.0 of the City of Kenosha Zoning Ordinance**

In order for my project to be approved, I understand that all six items under Section A below must be checked and adhered to.

**Section A:**

- Covered porch or stoop is defined by columns, railings, posts, etc. (Covered porch or stoop may extend into front setback by up to six feet).
- Porch/stoop covering is no higher than twelve feet above porch and is a minimum of 30% solid construction.
- The footprint of attached garage is less than the footprint of the house.
- If most of the surrounding houses have detached garages, and this project is proposing an attached garage, the garage must be less than 50% of the width of the house (less than 60% in RR1, RR3, RS1, RS2, and RD zoning); and, located even with or set back from the front of the existing house (it may extend ten feet in front of the house in RR1, RR2, RR3, RS1, RS2, and RD zoning if a 25 square foot covered porch is included in the project).
- There is a minimum requirement of a nine square foot window or other opening per story, per side.
- Addition does not vary more than one story from adjacent houses.

In addition, I also understand that in order for my project to be approved, I must check and adhere to a minimum of three items under Section B below.

**Section B:**

- Orientation of the entire building matches that of surrounding properties.
- Visual size of the entire project when complete does not vary more than 125% larger or smaller than the adjacent houses.
- If the surrounding area has predominantly raised porches, the project also requires a raised porch.
- Building materials match the prevailing style on surrounding houses.
- Roof slope and orientation match the prevailing style on surrounding houses.

**The undersigned hereby agrees to fully comply with the requirements of Chapter 3.0 of the City of Kenosha Zoning Ordinance and executes this Certificate of Compliance for the purpose of securing a building permit. The undersigned further understands that an occupancy permit will not be approved and issued for subject buildings found not to be in compliance with said ordinance upon final inspection.**

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

## **SURVEY REQUIREMENTS:**

### **Why is a Survey Required?**

A property survey is required for all proposed **residential additions**. Land and its improvements are a major financial investment; therefore, all land ownership boundaries, corners, features, and improvements should be located, monumented, and mapped by a property survey and filed in public records. A survey will verify that planned improvements are in compliance with zoning setbacks and coverage requirements.

### **What is a Property Survey?**

A property survey is a detailed plan of the lot with all existing and proposed improvements shown on the plan.

### **Who Prepares the Property Survey?**

A property survey must be prepared by a Professional Land Surveyor who is licensed through the Wisconsin Department of Safety & Professional Services. The surveyor will stamp and certify the survey document.

### **What is Required to be Shown on the Survey?**

1. The property owner's name, the assessor's parcel number, and the site address.
2. All property lines, all easements (utilities, access, etc.), and site dimensions.
3. Exact location and dimensions of all existing and proposed buildings or additions, distances between existing and proposed buildings or additions, and distances from existing and proposed buildings or additions to all property lines.
4. Lot size and all adjacent public streets, alleys, and roadways.
5. Location of all impervious surfaces on the lot (i.e., patios, sidewalks, existing and/or proposed driveways).
6. Identity of each building by its use (garage, residence, etc.), including decks, retaining walls, etc.
7. Owner must be able to show corner irons on the site to the satisfaction of the building inspector.
8. Proposed drainage patterns and proposed changes to existing yard grade.



This is a guide to the most common questions and problems.  
It is not intended, nor shall it be considered, a complete set of requirements.

Department of Community Development and Inspections  
625 52<sup>nd</sup> Street, Room 100, Kenosha, WI 53140  
Phone 262.653.4263, Fax 262.653.4254  
[www.kenosha.org](http://www.kenosha.org)