



APPLICATION FOR NON-STRUCTURAL DEMOLITION PERMIT COVER SHEET

Project Address _____

NOTE: This permit is for removing salvageable materials from a building and is not for demolition (interior or exterior) of the structure itself.

Please complete and submit the following:

1. _____ Non-Structural Demolition Permit application
2. _____ One (1) List of salvageable materials to be removed
3. _____ Plan of Activities (attach hereto)
 - Project Narrative
 - Identify location(s) and material for mechanized processes (i.e. shredders, grinders, crushers, etc.)
 - Identify locations of dumpsters, stockpiles, or other containments (if stockpiling soil refer to Ch. 33) Land-Disturbing Erosion And Sediment Control Ordinance)
 - Identify location(s) of Non-Structural Demolition Activities
4. _____ Will asbestos be disturbed or removed? Yes _____ No _____
_____ If yes, documentation from Wisconsin-licensed inspection firm is required.

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 NON-STRUCTURAL DEMOLITION PERMIT
Form #DCI141 (rev. 02/20)

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

Project Address _____ Suite _____

Project Name _____

Property Owner _____ Applicant _____

Mailing Address _____ Mailing Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Phone (_____) _____ Phone (_____) _____

Applicant e-mail _____

Project Contact Person _____ Phone (_____) _____

Estimated cost of work to be done: _____

Project Description: _____

Security:

Letter of Credit (attached hereto); or

Alternate Security (attach description of extraordinary circumstances to consider and alternate security proposed

Proof of Insurance: attach hereto to be submitted by Licensee's Contractor(s)

Mechanized Reduction Process Exemption Yes No

_____ *Applicant must provide to the City, and must maintain, a list of initial contractors doing work that is subject to this*

Initials *Non-Structural Demolition Permit, which list of contractors shall include proof of valid and subsisting policies of insurance in satisfaction of the General Operating Requirements specified in § 13.0112 of the Code of General Ordinances.*

For Office Use Only:					
Plan File #	_____	Zoning	_____	Review Chapter	_____
Application Date:	_____	Approval Date:	_____		
Date Issued:	_____	(valid 180 days from date issued)	Expiration Date:	_____	

_____ *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.*

Applicant Signature: _____

DESCRIPTION	FEE	QTY	PLAN REVIEW SQUARE FEET	FEE	QTY
NON-STRUCTURAL DEMOLITION	\$500.00	_____	50,000-75,000	\$ 1,140.00	_____
			75,001-100,000	\$ 1,260.00	_____
			100,001-200,000	\$ 1,380.00	_____
			Over 200,000	\$ 1,800.00	_____