

TOWN OF DOVER
 RACINE COUNTY, WI
BUILDING INSPECTOR
 4110 S BEAUMONT
 KANSASVILLE, WI 53139
 DOVER: (262) 878-2200
 CELL #: (262) 895-9405
 FAX: (262) 878-2595

BUILDING PERMIT NO: _____
ELECTRICAL PERMIT NO: _____
PLUMBING PERMIT NO: _____
HVAC PERMIT NO: _____
CONSTRUCTION COST: _____

The undersigned hereby applies for a permit to do the work herein described and hereby agrees that all work will be done in accordance with all the laws of the State of Wisconsin and all the ordinances of the Town of Dover. **TAX KEY #:** _____

JOB LOCATION: _____

OWNER: _____ **OWNER PHONE:** _____

CONTRACTOR: _____ **LICENSE #:** _____

ADDRESS: _____

PHONE: _____ **FAX:** _____

- WORK CONSISTS OF:**
- New Building
 - Addition
 - Accessory Building/Garage
 - Roofing/Siding/Fence
 - Alteration/Repair
 - Deck
 - Electrical
 - Plumbing
 - HVAC

COMMENTS:

CALL FOR ALL INSPECTIONS ~~ 48 HOURS NOTICE REQUIRED

FAILURE TO CALL FOR FINAL INSPECTION WILL RESULT IN A \$50.00 PENALTY.

Triple permit fees will be assessed if work is started without a valid permit. Penalty fees will be assessed when work progresses without required inspections.

WORK NOT COMPLETE AT TIME OF SCHEDULED INSPECTION \$100.00 FEE

CONTRACTOR'S SIGNATURE:

FEES:
 Building _____
 Electric _____
 Plumbing _____
 HVAC _____

INSPECTOR'S SIGNATURE:

DATE:

Total Fees _____

DATE:
