

TOWN OF DOVER
 RACINE COUNTY, WI
BUILDING INSPECTOR
 4110 S BEAUMONT AVE
 KANSASVILLE, WI 53139
 DAVID T HENDRIX JR.
 NORWAY: (262) 895-2732
 CELLPHONE: (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 NO: _____

JOB LOCATION: _____

OWNER: _____ OWNER PHONE: _____

CONTRACTOR: _____ LICENSE #: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

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

WORK BEING DONE/COMMENTS:

CALL FOR ALL INSPECTIONS ~ 48 HOURS NOTICE REQUIRED

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

Double 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:(Min. Permit Fee \$70)
 Building: _____
 Electric: _____
 Plumbing: _____
 HVAC: _____
 Technology: + \$2.00
Total Fees: _____

INSPECTOR'S SIGNATURE:

DATE:

DATE:
