

TOWN OF DOVER
RACINE COUNTY, WI
BUILDING INSPECTOR
BEN PETERS
4110 S BEAUMONT AVE
KANSASVILLE, WI 53139
NORWAY: (262) 895-2732
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:

