



# BUILDING ALTERATION PERMIT APPLICATION

Application Number: \_\_\_\_\_

Location: \_\_\_\_\_

Building Contractor: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Dwelling Contractor ID #: \_\_\_\_\_

Qualifier Number: \_\_\_\_\_

## Type of Work

### Residential

### Commercial-Heated

### Commercial-Unheated

\_\_\_\_\_ Alteration (A021)

\_\_\_\_\_ Alteration (C031)

\_\_\_\_\_ Alteration (C050)

\_\_\_\_\_ Repair (A021)

\_\_\_\_\_ Repair (C031)

\_\_\_\_\_ Repair (C050)

\_\_\_\_\_ Wrecking (M000)

\_\_\_\_\_ Wrecking (M010)

\_\_\_\_\_ Wrecking (M010)

\_\_\_\_\_ Reduction of size (A021)

\_\_\_\_\_ Reduction of size (C031)

\_\_\_\_\_ Reduction of size (C050)

\_\_\_\_\_ Moving <500 SF

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\_\_\_\_\_ Moving <500 SF

Description: \_\_\_\_\_

Cost of Improvement: \$ \_\_\_\_\_

Material cost only

Minimum fee: \$50 Residential; \$100 Commercial/Industrial

The applicant certifies that all of the above information is true and correct, and agrees to do the work described according to the information given, the plans and the specifications filed, and to be in full compliance with all applicable laws, codes, rules and regulations of the City of Beloit and the State of Wisconsin. **This permit is good for one year; deadlines contained therein are always subject to any shorter deadline contained in an order imposed by the Division of Housing Services and Planning and Building Services.**

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Inspector's signature: \_\_\_\_\_

Planning and Building Services (608) 364-6700

Date: \_\_\_\_\_ Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Credit Card: \_\_\_\_\_

Check Number: \_\_\_\_\_