

Town of Herman

N8139 Franklin Road Plymouth, WI 53073 (920) 565-2934

BUILDING & ZONING PERMIT APPLICATION

(New Construction of One or Two Family Dwellings require a different form)

PERMIT APPLICANT					
Name:		Phone Number:			
Mailing Address:		E-mail:			
City: State:	Zip:				
PROPERTY OWNER (If different than above)					
Name:		Phone Number:			
Mailing Address:		E-mail:			
City: State:	Zip:				
PROJECT DESCRIPTION					
Project Address:		Parcel No:			
City: State:	Zip:				
Current Zoning:	Current Use:				
Description of proposed work:					
5					
Estimated Project Cost:					
For new buildings and additions that will change the footprin	t of the existing building,	please provide a plan, drawn to			
scale, of the location of the building in relation to all other bu	•				
Width: No. of Rooms:	Height:	Sq. Feet:			
Length: No. of Stories:	Basement:	_			
 Has a Shoreland/Floodplain Permit been obtained from Sheb	oygan County Planning: (F	Provide copy) Y N N/A			
Has a Sanitary Permit been obtained from Sheboygan County	Planning: (Provide copy)	Y N N/A			
PROJECT TEAM					
General Contractor	Architect				
Carpenter	Mason				
Electrical Contractor	HVAC				
Electrical Service Provider					
Required Information for Service Inspection					
I have be a castiful short all the disafferment in a second and be assisted to					
I hereby certify that all the information provided herein is tru is for administrative purposes only. Please be aware that ad		•			
may apply. It is the applicant's responsibility to obtain all ne	= -	_			
land use requirements. Waste and refuse from projects are		-			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Applicant's Signature:	Date Signed:				
OFFICE USE ONLY					
Inspections Required:					
□ Footing □ Foundation □ Rough Construction □ Rough Electrical □ Final Electrical □ Electrical Service					
□ HVAC □ Final □ Other:					
Plumbing Inspections: Rough Plumbing Final Plumbi	ng (Complete Secona Pa	ge)			
Set Back Information:					
Front: Rear:	Side f	rom Lot Line:			
Permit Fees: Late Fees:	Total:				
		Permit No:			
Permit Issued By:	Date Issued:	Permit NO.			
Permit Denied By:	Date Denied:				
Reason for Denial:					
CONTACT INFORMATION					
Eric Raquet - Building and Zoning Administrator	Mail Application to				
E-mail: <u>eraquet@townherman.com</u>	N8139 Franklin Roa				
Phone: (920) 918-9352	Plymouth, WI 5307	3			



(920) 918-9352

Phone:

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PLUMBING PERMIT APPLICATION

PLUMBER'S NAME				
Name:	Phone Number:			
Mailing Address:		E-mail:		
City:	State:	Zip:		
PROJECT DESCRIPTION				
PROJECT DESCRIPTION FIXTURES: Sinks Lavatories Bath Tubs Water Closets Laundry Tubs Floor Drains Dishwashers Garbage Disposals Bar Connections Sump Pumps Hose Bibs Water Softeners Other ALL INFORMATION ON THIS PER	Number	ALL TESTS ON ROUGH IN AS PER WISONSIN PLUI If more than two (2) inspections they will be charged to the contr home owner, or the individual de plumbing at \$50.00 per visit.	MBING CODE are required, racting plumber, oing the - 1) (a), STATING THAT	
and with the conditions of this p	permit, understands t	niform Dwelling Code and other mu hat the issuance of the permit creat lity, and certifies that all of the abov Date Signe	tes no legal liability, we information is	
		246 0.8		
PLUMBER & INSPECTOR CRETIFICATIONS Signature of Master Plumber & C	Credential No.	Date		
Under floor / basement test & ir	nspection	Date	_	
		Date	-	
Final		Date	-	
Plumbing Inspector: Brett Reichardt 361B Carriage House Elkhart Lake, WI 530 (920) 226-0751				
CONTACT INFORMATION Fric Paguet - Ruilding and Zonin	a Administrator	Mail Application to:		
Eric Raquet - Building and Zoning Administrator Mail Application to: F-mail: eraquet@townherman.com N8139 Franklin Road				

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