VILLAGE OF BIRON 451 KAHOUN RD WISCONSIN RAPIDS, WI 54494

VILLAGE OF BIRON COMMERCIAL

App	lication	No.	

APPLICATION 715-423-6584 Parcel No. 451 KAHOUN ROAD, WISC. RAPIDS, WI 54494 715-423-6584 □Constr. □HVAC □ Electric □ Plumbing □ Fire Suppression □ Fire Alarm Owner's Name Mailing Address Telephone Contractor's Name: □Con □Elec □HVAC □Plbg Lic/Cert# Mailing Address Tel. **FAX** Contractor's Name: □Con □Elec □HVAC □Plbg Lic/Cert# Mailing Address Tel. FAX Contractor's Name: □Con □Elec □HVAC □Plbg Lic/Cert# Mailing Address Tel. **FAX** Contractor's Name: □Con □Elec □HVAC □Plbg Lic/Cert# Mailing Address Tel. **FAX PROJECT** Lot area Ft ☐One acre or more of 1/4, 1/4, of Section , T N, R E (or) W LOCATION soil will be disturbed **Building Address** Subdivision Name Lot No. Block No. 1. PROJECT 3. OCCUPANCY 6. ELECTRIC 9. HVAC EQUIP. 12. ENERGY SOURCE Entrance Panel Fuel Nat Gas □New □Repair ☐Multi-Family □Furnace Space Htg □Radiant Baseboard □R1 □R2 □R3 □Alteration □Raze Amps: Water Htg □Addition □Move □Commercial □ □Underground ☐Heat Pump □Early Start □Temporary □Retail □Mfg. □Overhead □Boiler □Central AC □Footing & Foundation ☐ S-Storage □Volts □Other: ☐ A-Assembly □Fireplace 7. WALLS □Roof Top Units □Other 2.AREA INVOLVED (sq. ft.) 4. CONST. TYPE □Wood Frame □Other 13. FIRE PROTECTION ☐Grease Hood □Site-Built □Steel SPRINKLER CONTRACTORS NAME: \Box ICF ☐Mfd per WI 10. SEWER □ 1A Î□ 1B □ IIA □Timber/Pole ADDRESS: \Box IIB \Box IIIA \Box IIIB □Other: \square IV \square VA \square VB PHONE FAX □Municipal ☐Sanitary Permit # FIRE ALARM CONTRACTORS NAME: 5. STORIES 8. USE ☐Grease Trap ADDRESS: □1-Story □Seasonal PHONE FAX □2-Story □Permanent □3-Story 11. WATER 14. ESTIMATED BUILDING COST □Temp: □Plus Basement □Other: ☐Municipal \$ ☐ Other □On-Site Well APPLICANT'S SIGNATURE DATE SIGNED APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. \square See attached for conditions of approval. This is a tracking document only; no municipal inspections will be done. If required, state inspections will still be mandated. □Town of X Village of □City of □County of □State-WI Municipality Number of Dwelling Location JURISDICTION TRACKING FEES: DOCUMENT ISSUED ISSUED BY: BUILDING \$250 □Construction \square HVAC Name ELECTRICAL \$100 PLUMBING \$100 □Electrical HVAC \$100 □Plumbing Telephone No. 715-423-6584 ☐Fire Suppression OTHER □Fire Alarm System TOTAL \$ ☐Smoke Alarm System