

Please check one: Commercial Institutional Manufacturing Multi-family

Project Address _____

Please complete and submit all of the following items as a packet*:

1. Addition permit application
2. Occupancy Commercial permit application (for building shell)
3. Erosion Control Commercial permit application (signed by property owner), along with:
 - Water Resources Application for Project Permits (WRAPP) from the Department of Natural Resources (one or more acre)
 - One (1) set of erosion control plans (civil drawings). (Please contact the Soil Erosion Specialist at 262.653.4247 with questions)
4. Two (2) certified surveys or two (2) engineered site plans
5. **Required Plans**:**

Pursuant to Wisconsin Statute §101.12, for buildings over 50,000 cubic feet in volume, the plans must be reviewed by the State or a delegated agent; Kenosha has chosen E-Plan Exam as the City's delegated agent for plan review. In addition, pursuant to Administrative Code Section SPS361.31, plans for buildings over 50,000 cubic feet in volume are required to be prepared, signed, sealed, and dated by a Wisconsin-registered engineer or architect.

 - State has conducted Review.** A plan review fee will not be charged by the City, as plan review fees will have been paid to the state. Plan review fees, whether assessed by the City or the State, are set by State Statute.
 - Attach one (1) copy of State Approval Letter.
 - Provide one (1) full plan set with a Cover Page that contains the stamps and signatures of Architects and/or Engineers and a complete index, and three (3) additional identical cover pages.
 - Include a set of plans in pdf format or on a flash drive. Plans in pdf format should be emailed to bldgpermits@kenosha.org after submittal of this packet.
 - If **Multi-family** project, please also enclose one (1) floor plan (11" x 17") listing unit numbers.
 - E-Plan Exam has conducted Review.** Information for plan review through E-Plan Exam can be found on kenosha.org <https://www.kenosha.org/departments/city-inspection/building-inspection-ci/safebuilt-state-plan-review-applications-ci>.
 - Attach one (1) copy of State Approval Letter.
 - Provide one (1) full plan set with a Cover Page that contains the stamps and signatures of Architects and/or Engineers and a complete index, and three (3) additional identical cover pages.
 - Include a set of plans in pdf format or on a flash drive. Plans in pdf format should be emailed to bldgpermits@kenosha.org after submittal of this packet.
 - If **Multi-family** project, please also enclose one (1) floor plan (11" x 17") listing unit numbers.

***IMPORTANT:** Please note that all permit applications relevant to the project, including, but not limited to Plumbing, Electric, and HVAC, must be submitted with the subcontractors' information and valid Wisconsin license numbers prior to beginning above work.

****IMPORTANT:** A Conditional Use Permit submittal to City Development in Room 308 is required before submittal of this packet. Please call 262.653.4030 with questions. Required Plans submitted with this application are in addition to plans submitted to City Development.

Fire Department Approval:

This box for DCI use:

After Approval/Processing of this Permit Application:
If you do not intend to proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan review fees will be charged. Any/all unpaid permit fees, along with an additional \$100.00 Administrative Fee, will be processed as a special charge against the real estate upon which the service was performed.



FOR OFFICE USE ONLY	
Date	_____
Permit #	_____
Needs Approval	_____
IP	_____
Fee'd	_____

APPLICATION FOR ADDITION PERMIT*
Form #DCI103 (rev. 11/23)

***Commercial, Institutional, Manufacturing, or Multi-family**

You will be notified when your permits are ready; please do not submit payment with permit applications.

Project Address _____ **Suite number** _____

Project (Business) Name _____

Project Owner _____ **Contractor** _____

Mailing Address _____ **Mailing Address** _____

City _____ **State** _____ **Zip** _____ **City** _____ **State** _____ **Zip** _____

Phone (_____) _____ **Phone (_____)** _____

Property Owner's e-mail _____ **Contractor e-mail** _____

➔ **Estimated Cost** (excluding plumbing, electric, HVAC) _____ **Area** _____

Construction Class _____ **Height** _____

If Multi-family, number of units: _____ **Sprinklered :** Yes _____ No _____

If at any time during or after the approval process you determine that you will not proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan review fees will be charged. Any/all unpaid permit fees, along with an additional \$100.00 Administrative Fee, will be processed as a special charge against the real estate upon which the service was performed.

<u>This Box for Office Use Only:</u>	
Zoning _____	Zoning Review/Approval _____

DESCRIPTION	FEE	QUANTITY
ADDITIONS	\$.50 Per Sq Ft	_____
MINIMUM FEE	\$ 300.00 Ea.	_____
FIRE PREVENTION		
BUREAU INSPECTION	\$ 72.00 Ea.(X2)	_____
ZONING FEE	\$ 60.00	_____
ZONING/ADMIN FEE	\$ 250.00	_____

SQUARE FEET/PLAN REVIEW FEE*	QUANTITY
0-2,500	\$ 250.00 _____
2,500-5,000	\$ 300.00 _____

If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances.

I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all of the permit information herein is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

I certify that in regard to the property that is the subject of this permit I either (1) have permission from the owner to apply for this permit on the owner's behalf, or (2) I am the owner.

Applicant Signature _____ **Date:** _____

Please Print Name _____



FOR OFFICE USE ONLY	
Date	_____
Permit #	_____
Needs Approval	_____
IP	_____
Fee'd	_____

APPLICATION FOR OCCUPANCY – NEW BUILDING (SHELL ONLY)*
Form #DCI115 (rev. 01/20)

***For Commercial, Institutional, Manufacturing, and Multi-family**

Project Address _____

Project Name _____

Intended (Business) Use _____

Business Owner _____ Contractor _____

Mailing Address _____ Mailing Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Phone (_____) _____ Phone (_____) _____

Zoning _____ Number of Units (if applicable) _____

DESCRIPTION	FEE	QUANTITY
Commercial New Building	\$ 240.00	_____
Multi-family New Building	\$ 180.00	_____
plus multi-family per unit fee	\$ 48.00 per unit	_____
Fire Prevention Bureau Inspection	\$ 72.00 Ea.(X2)	_____

After Approval/Processing of this Permit Application:

If you do not intend to proceed with this project, please contact our office at 262.653.4263 to avoid paying the entire cost of the permit. Administrative and/or plan review fees will be charged. Any/all unpaid permit fees, along with an additional \$100.00 Administrative Fee, will be processed as a special charge against the real estate upon which the service was performed.

Applicant Signature _____ **Date** _____

Please Print Name _____



FOR OFFICE USE ONLY	
Date	_____
Permit #	_____
Needs Approval	_____
IP	_____
Fee'd	_____

APPLICATION FOR EROSION CONTROL PERMIT (COMMERCIAL)
Form #DC1142 (rev. 01/20)

IMPORTANT: After erosion control measures are installed according to the approved plan, you are required to call the Soil Erosion Specialist at 262.653.4247 to schedule an inspection.

Reminder: Erosion Control Plans that meet the requirements of Chapter 33.11 of the Code of General Ordinances are required to be submitted with this application

Project Address _____	Project Name _____
Property Owner _____	Contractor _____
Mailing Address _____	Mailing Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone (_____) _____	Phone(_____) _____
Property Owner E-mail Address _____	Contractor E-mail Address _____

Project Contact Person _____
Phone _____ E-mail Address _____

Total Area to Be Disturbed (square feet) _____

Description of Land Disturbing Activity: Excavating: Cubic Yards _____ **OR** Filling: Cubic Yards _____

Trenching: Linear Feet _____ Grading or Site Stripping: Square Feet _____

Shoreland/Wetland Affected _____ Anticipated Completion Date: _____

DESCRIPTION	FEE	QUANTITY
PLAN REVIEW - Commercial	\$ 200.00	_____
BASE FEE	\$ 200.00	_____
SQUARE FOOT CHARGE	\$5.00 per 1,000 Sq. Ft. (\$2,000.00 max.)	_____
ESCROW (More than one acre)	\$5,000.00	_____

If work is started without first obtaining a permit, a penalty fee will be charged in accordance with Chapter 9.07C of the Code of General Ordinances.

WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE(S) OF SOIL

I understand that this project is subject to Ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all of the permit information herein is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

→ **Property Owner's Signature** _____ **Date** _____

Please Print Name _____