



**FOR OFFICE USE ONLY**

Date \_\_\_\_\_  
 Permit # \_\_\_\_\_  
 Needs Approval \_\_\_\_\_  
 IP \_\_\_\_\_  
 Fee'd \_\_\_\_\_

**APPLICATION FOR PERMIT FOR MOVING A BUILDING**  
**Form #DCI152 (rev. 02/20)**

You will be notified when your permit is ready; please do not submit payment with permit application.

Current Address \_\_\_\_\_

Property Owner \_\_\_\_\_

**Contractor** \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

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

Phone (\_\_\_\_\_) \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_

Contractor e-mail \_\_\_\_\_

**Estimated Cost** \_\_\_\_\_

New Address \_\_\_\_\_ Lot # \_\_\_\_\_ Subdivision \_\_\_\_\_

Area \_\_\_\_\_ Stories \_\_\_\_\_ Height \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_

**For Office Use Only:** Zoning - Existing Site: \_\_\_\_\_ Zoning – Proposed Site: \_\_\_\_\_ Zoning Review/Approval \_\_\_\_\_

**General Contractors\* of One- or Two-family Dwellings:**

Any general contractor that performs work on a one- or two-family dwelling must possess the following two licenses:

1) Dwelling Contractor Certification number: \_\_\_\_\_

2) Dwelling Contractor Qualifier Certification number: \_\_\_\_\_

(Licenses are available through the Department of Safety and Professional Services (DSPS) at: <http://dsps.wi.gov>)

Dwelling Contractor Qualifier Licensee signature: \_\_\_\_\_ Date \_\_\_\_\_

Please Print name: \_\_\_\_\_

**\*Note to Property Owners:**

If the owner of the property is listed as the general contractor, a license is not required; however, the attached "Cautionary Statement" must be signed by the property owner.

DESCRIPTION	FEE	QUANTITY	DESCRIPTION	FEE	QUANTITY
NEW BUILDINGS	\$ .50 Per Sq Ft	_____	DAY CARE	\$60.00 Ea	_____
PRE-MOVE FEE/PRINC. BLDG.	\$120.00 Ea	_____	FOOTING/FOUNDATION–Resid	\$180.00 Ea	_____
PRE-MOVE FEE/ACCS. BLDG.	\$120.00 Ea	_____	FOOTING/FOUNDATION–Comm	\$240.00 Ea	_____
MOVE BLDG/STR OCCU 2 BLDG	\$60.00 Ea	_____	PLAN REVIEW - Residential	\$180.00 Ea	_____
MOVE BLDG/STR. OCCU ADDL	\$6.00 Per Block	_____			

**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.

*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.*

**Contractor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Print Name:** \_\_\_\_\_

## CAUTIONARY STATEMENT TO OWNERS OBTAINING BUILDING PERMITS

*101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:*

If the owner hires a contractor to perform work under the building permit, and the contractor is not bonded or insured as required under S.101.654(2)(a), the following consequences might occur:

- a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.
- b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two-family dwelling code or an ordinance enacted under Sub.(1)(a) because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

## CAUTIONARY STATEMENT TO CONTRACTORS FOR PROJECTS INVOLVING BUILDINGS BUILT BEFORE 1978

If this project is in a dwelling or child-occupied facility, built before 1978, then the requirements of Ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. For details of how to be in compliance, go to <http://dhs.wisconsin.gov/lead/renovationrules.htm>.

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I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit (of a single-family or two-family dwelling) without a Dwelling Contractor Certification and have read this Cautionary Statement regarding contractor responsibility. (**Note:** This form is not required for general contractors of multi-family or commercial buildings).

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

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_