



DECK/PORCH BLDG PERMIT APPLICATION

8811 CAMPUS DR, MT PLEASANT, WI 53406
PH 262-664-7800 FAX 262-6647801
www.mtpleasantwi.gov

PERMIT # _____

PARCEL ID #151-03-_____

JOB SITE ADDRESS _____ ZIP _____

OWNER'S NAME _____ PHONE NUMBER _____

PERMIT APPLICANT: ___ PROPERTY OWNER or ___ CONTRACTOR (*contractors complete lower portion*)

- IF THE PERMIT APPLICANT IS THE PROPERTY OWNER THEN ALSO SIGN THE "CAUTIONARY STATEMENT"
- IF THE PERMIT APPLICANT IS A CONTRACTOR THEN ALSO INCLUDE APPLICABLE LICENSE OR CREDENTIAL NUMBERS

DESCRIPTION: Deck___ Porch___ Roof Structure___ Sunroom___ 3 Season Room___ Gazebo___ Pergola___

STRUCTURE: Length_____ Width_____ Square Feet _____ Attached (*to a house*)___ Detached___

Project Value \$ _____ (*materials & labor costs*) Notes: _____

Building Permit Fee:

\$ _____ + Review Fee \$ _____ **Total Permit Fee \$ _____**

Sunroom/3 Season Room Permit Fee: \$.32/ sq. ft. (*min \$55.00*)

Review Fee: Attached (*to a house*) : \$75.00 or Detached \$35.00 or \$60.00 if greater than 180 sq. ft.

Typical permit fee: **Deck/ Porch/ Gazebo/ Pergola \$90.00** (Bldg \$55.00 + Review \$35.00)

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COMPANY NAME _____ PHONE # _____

CONTRACTORS CREDENTIAL# _____ DCQ# _____

STREET _____ CITY _____ STATE _____ ZIP CODE _____

APPLICANT NAME _____ DATE _____

BUILDING INSPECTOR _____ DATE _____

PLANNING/ ZONING _____ DATE _____

ENGINEERING _____ DATE _____

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with Ordinances of the Village of Mount Pleasant and State of Wisconsin laws regulating the construction of buildings and to observe and maintain the legal requirements as provided by the Village of Mount Pleasant Zoning Ordinance.