

**APPLICATION FOR BUILDING PERMIT
TOWN OF SALEM, KENOSHA COUNTY, WISCONSIN**

PERMIT NUMBER _____ DATE: _____

NAME: _____ TELEPHONE: _____

ADDRESS: _____ PARCEL#: _____

LOCATION: _____ LOT: _____ BLOCK: _____

New Construction () Remodeling ()

Industrial () Residence () COST: _____
Residence () Industrial ()
Business () Business () FEE: _____

Description of Work to be done:

.....
BUILDING PERMIT:

Zoning District _____ Premises Occupied as: _____
Class of Construction: _____ No. of stories _____
Size _____ Wide _____ x _____ Long Area: _____ Sq. Feet
Estimated Cost: _____ Permit Fee: _____
Contractor: _____ License No: _____

.....
HEATING & AIR CONDITIONING:

Contractor: _____ License No: _____
Estimated Cost: _____ Permit Fee: _____

.....
ELECTRIC:

Contractor: _____ License No: _____
Estimated Cost: _____ Permit Fee: _____

.....
EROSION CONTROL:

Installer _____ Estimated Cost: _____ Fee: _____

.....
ASSESSING RECORD MAINTENANCE FEE:

FEE \$ _____

We agree that the property is legally zoned as: _____

Date: _____ Owner _____
(or agent)

Mail to: Town of Salem Building, PO Box 443 Salem, WI 53168