

CITY OF HUDSON

505 3RD STREET
 HUDSON WI 54016-1694
 FAX (715)386-3385
www.ci.hudson.wi.us

**COMMERCIAL
 BUILDING PERMIT
 APPLICATION**

DAVID GRAY
 BUILDING INSPECTOR
 (715)386-4775, ext. 132
dgray@ci.hudson.wi.us

SCOTT ST. MARTIN
 FIRE CHIEF
 (715)377-3152
ssmartin@ci.hudson.wi.us

The city has a combination permit system. A permit will include the building permit, electrical, plumbing, and/or HVAC. Therefore, information for all contractors associated with the project must be completed in the contractor section below.

Building/Site Address

Owner's Name

Telephone (Daytime)

Email or Fax

Mailing Address

Applicant's Name (if different than owner)

Telephone (Daytime)

Email or Fax

Mailing Address

Project Description

Approximate Project Cost

Anticipated Start Date

Application will not be
 accepted without the
 following:

Contractor(s) – Company Name, Address, & Telephone Number

WI Credential Number(s)

General Contractor

NOT REQUIRED

Electrical Contractor

Master Electrician

Heating/Venting/Air Conditioning (HVAC)

Plumbing

Fire Sprinkler*

Fire Alarm*

NOT REQUIRED

*If fire sprinkler or fire alarm only, the following fees apply:

Sprinkler/Alarm System - Plan Review & Inspection over \$1,500.00	\$125.00
Sprinkler/Alarm System - Plan Review & Inspection under \$1,500.00	\$65.00

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

SIGNATURE OF APPLICANT _____ DATE _____