Application No._____ Parcel No. 002-_____

TOWN OF ALGOMA PERMIT APPLICATION

15 North Oakwood Road, Oshkosh, WI 54904
Telephone 920-235-3789

PERMIT REQUESTED ☐ CONST ☐ HVAC ☐ ELEC ☐ PLUMB ☐ EROSION ☐ OTHER:_____

Owner's Name	Mailing Address	Telephone No.

Contractor's Name	Lic/Cert #	Mailing Address	Telephone No.
☐ Const ☐ Elect ☐ HVAC ☐ Plumb.			
☐ Const ☐ Elect ☐ HVAC ☐ Plumb.			
☐ Const ☐ Elect ☐ HVAC ☐ Plumb.			
☐ Const ☐ Elect ☐ HVAC ☐ Plumb.			

Project Site Address	ZONING PERMIT REQ.	☐ YES ☐ NO

Zoning District(s)	Zoning Permit No.	SET BACKS	FRONT	REAR	LEFT	RIGHT

AREA INVOLVED Living Area _____Sq. Ft. Unfinished Basement _____Sq. Ft. Garage _____Sq. Ft.

1. CONST.
PROJECT TYPE ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Raze ☐ Move ☐ Other
DESCRIPTION OF WORK
ESTIMATED COST $

2. ELECTRICAL PROJECT TYPE ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Temporary ☐ Other
DESCRIPTION OF ELECTRICAL WORK ☐ New ☐ Service Change ☐ Underground ☐ Overhead
AMPS ☐ 100 ☐ 200 ☐ _____
ESTIMATED COST $

3. HVAC PROJECT TYPE ☐ New ☐ Addition ☐ Alteration ☐ Replacement ☐ Other
DESCRIPTION OF HVAC WORK
TYPE OF EQUIPMENT ☐ Forced Air Furnace ☐ Boiler ☐ Air Conditioner
☐ Radiant Baseboard Heat or Panel
FUEL ☐ Nat. Gas ☐ Oil ☐ Solid ☐ L.P. ☐ Elect ☐ Solar
ESTIMATED COST $

4. PLUMBING PROJECT TYPE ☐ New ☐ Addition ☐ Alteration ☐ Replacement ☐ Other
DESCRIPTION OF PLUMBING WORK

TYPE OF EQUIPMENT	FIXTURE INVOLVED	ESTIMATED COST
☐ Water Heater ☐ Water Softener	☐ Toilet ☐ Shower ☐ Bath tub ☐ Whirlpool	
☐ Pressure Tank ☐ Water Treatment System	☐ Sink ☐ Laundry Sink ☐ Other	$

INSPECTIONS REQUIRED Call for inspections as indicated 233-1999 or 685-6588
☐ Footings (Before Pouring) ☐ Foundation (Before Backfill) ☐ Frame ☐ Mechanical Inspections ☐ Insulation ☐ Occupancy ☐ Final

The applicant agrees to comply with all applicable codes, state statues, and ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, expressed or implied, on the Department or municipality and its agents, and certifies that all the above information is accurate.

APPLICANT'S SIGNATURE **DATE SIGNED**

PERMIT ISSUED BY	NAME	CERT. NO.	DATE	FEE $	CHECK NO.