

Town of Dovre
Local Building Permit

Date: _____

The undersigned hereby applies for a permit to do work as described and located as shown on this application. The undersigned agrees that all work will be done in accordance with local zoning requirements, all requirements of the Town of Dovre and with all laws of the State of Wisconsin applicable to said premises.

Owner/Agent Name: _____

Address: _____

Location of Property:

Legal Description: _____

Lot Number: _____ Block Number: _____ Parcel Number: _____

Subdivision, Addition, Address or Replat: _____

Project Information:

Type of Building: _____

Class of construction: _____

Size _____ Feet wide _____ Feet Long _____ Total Sq. Feet _____

Height _____ No. of Stories _____

Estimated Cost _____

Work consists of (check) New Building _____ Addition _____

Repairs _____ Alteration _____

Moving _____ Demolition _____

Attach these items to this application:

(a) Location sketch drawn to scale and showing dimensions of the parcel, the exact location of the proposed structure and physical features of the property such as existing buildings, roads, waterways, wetlands and hill

(b) Copy of the sanitary permit

I hereby verify the truth and accuracy of the information given on this application and all supplemental materials submitted with it. I understand that false and misleading statements shall cause any permit that is issued to be null and void. I understand that a failure to comply with any condition placed on the permit is a violation of the town ordinance. I understand the building permits are valid two years from the date of issuance.

Building Permit Fee: _____

Driveway Permit Fee: _____

Total Fees Paid: _____

Owner/Agent Signature _____

Approved By _____ Date _____