

**Town Of Strongs Prairie
C/o Lakeside Inspections
P.O. Box 334
Necedah, WI 54646
1-800-440-1621**

Submittals for obtaining a building permit for a **Manufactured Home (Mobile Home)** built to the HUD Code.

1. **Sanitary Permit** – You must have a Sanitary Permit issued from Adams County.
2. **Town of Strongs Prairie Zoning Permit** – Submit this application directly to the Town of Strongs Prairie for approval.
3. **Adams County Shore land Land-Use Permit** – If the project is in the Shore land area (within 1,000 feet of a lake or 300 feet of a stream) you would be required to obtain this permit form Adams County.

Submit the Following to Lakeside Inspections at the Necedah address above

4. **Building Plans**
 - a. Plot plan showing the location of all existing and planned buildings, the location of the home, the well and septic locations, and lot lines.
 - b. Foundation Plans showing the type (piers, slab, crawlspace, full basement, etc.) and design of the foundation including anchorage details from the home to the foundation.
 - c. Size and location of any decks to be site built or indicate if stairs from the manufacturer are to be used. (2 legal exits are required before occupancy will be allowed).
 - d. Need the Manufactured date of the Home and a copy of the installation manual.
5. **Permit Applications and Fees.**
6. **The Manufactured Home Installers Affidavit** – The person who actually installs the home must be licensed by the State Dept. of Commerce per Comm. 5.327

Permit Fees

Bldg. Permit @ \$.09 per sq. ft. of manufactured area + \$225	_____
Plus Deck Area @ \$.09 per sq. ft.	_____
Plus Basement/ Crawlspace area @ \$.09 per sq. ft.	_____
Electrical Permit- Base Fee (add \$.03 per sq. ft. for basement or crawlspace)	\$ 50.00
Plumbing Permit – Base Fee (add \$.03 per sq. ft. for basement or crawlspace)	\$ 50.00
Total Fees	_____

**For information or inspections contact
Larry Gilles / Building Inspector # 70183
1-800-440-1621 or visit the web site at
www.bldgpermit.com**

Return this form to:

Town of Strongs Prairie

P. O. Box 69

Arkdale, WI 54613

TOWN OF STRONGS PRAIRIE ZONING PERMIT APPLICATION

1. Date of Application: _____

Permit No.: _____

2. Applicants Name: _____

3. Property Owner: _____

Mailing address: _____

City, state, zip: _____

Phone: _____

4. Contractor: _____

5. Property description:

Town Zoning District: _____

Shoreland area: ___ Yes ___ No

Wetland area: ___ Yes

No

Address: _____

Lot #: _____ Subdivision: _____

Legal description: _____

6. Property size:

Width: _____ Length: _____ No. Acres: _____

7. Property use:

Existing use(s) of property & structure(s):

Principal structure: _____

Accessory structure(s): _____

Land use(s): _____

Proposed use(s) of property & structure(s):

Principal structure: _____

Accessory structure(s): _____

Land use(s): _____

8. **Submit plot plan showing those applicable of the following:**

- | | |
|--|--|
| 1. Lot and dimensions. | 5. Existing & proposed use of each structure. |
| 2. Existing & proposed structures. | 6. All setbacks (lot line, adjacent structures, road, well, septic {tank & drain field}, surface water). |
| 3. Abutting roads, lakes, and streams. | 7. Building plans for new construction. |
| 4. Existing & proposed driveways, off street parking areas, open space, landscaping. | 8. Elevations of existing & proposed structures. |

9. The undersigned hereby applies for a zoning permit, and agrees that all work will be done in accordance with County zoning, Town of Strongs Prairie zoning, building code, and/or subdivision ordinances, and all laws of the State of Wisconsin.

10. By signing this application you give permission to Town officials to inspect the property listed in item 5.

X. Signature of owner / agent: _____ Phone: _____

____ Approved Date: _____

____ Denied Date: _____

Signature of zoning official: _____

Wisconsin Division of Safety and Buildings Wisconsin Stats. 101.63, 101.73		WISCONSIN UNIFORM BUILDING PERMIT APPLICATION				Application No.			
		Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m)]				Parcel No.			
PERMIT REQUESTED		<input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other:							
Owner's Name			Mailing Address			Tel.			
Contractor Name & Type			Lic/Cert#	Mailing Address		Tel. & Fax			
Dwelling Contractor (Constr.)									
Dwelling Contr. Qualifier			The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.						
HVAC									
Electrical									
Plumbing									
PROJECT LOCATION		Lot area Sq.ft.	<input type="checkbox"/> One acre or more of soil will be disturbed	_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E (or) W					
Building Address		Subdivision Name			Lot No.	Block No.			
Zoning District(s)		Zoning Permit No.		Setbacks:	Front ft.	Rear ft.	Left ft.	Right ft.	
1. PROJECT		3. OCCUPANCY		6. ELECTRIC		9. HVAC EQUIP.		12. ENERGY SOURCE	
<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Other:		<input type="checkbox"/> Repair <input type="checkbox"/> Raze <input type="checkbox"/> Move		<input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other:		Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead		<input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC <input type="checkbox"/> Fireplace <input type="checkbox"/> Other:	
2. AREA INVOLVED (sq ft)		4. CONST. TYPE		7. WALLS		10. SEWER		13. HEAT LOSS	
		<input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD		<input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other:		<input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____		_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)	
		5. STORIES		8. USE		11. WATER		14. EST. BUILDING COST w/o LAND	
		<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: <input type="checkbox"/> Plus Basement		<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:		<input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well		\$ _____	
Unfin. Bsmt		Unit 1	Unit 2	Total					
Living Area									
Garage									
Deck									
Totals									
I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.									
<input type="checkbox"/> I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the reverse side of the last ply.									
APPLICANT (Print): _____				Sign: _____			DATE _____		
APPROVAL CONDITIONS		This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.							
ISSUING JURISDICTION		<input type="checkbox"/> Town of <input type="checkbox"/> Village of <input type="checkbox"/> City of <input type="checkbox"/> County of <input type="checkbox"/> State→			State-Contracted Inspection Agency#:		Municipality Number of Dwelling Location _____		
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:			
Plan Review \$ _____		<input type="checkbox"/> Construction				Name _____			
Inspection \$ _____		<input type="checkbox"/> HVAC				Date _____ Tel. _____			
Wis. Permit Seal \$ _____		<input type="checkbox"/> Electrical				Cert No. _____			
Other \$ _____		<input type="checkbox"/> Plumbing							
Total \$ _____		<input type="checkbox"/> Erosion Control							

INSTRUCTIONS

The owner, builder or agents shall complete the application form down through the Signature of Applicant block and submit it and building plans and specifications to the enforcing municipality. Permit application data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local code administration. **Please type or use ink and press firmly with multi-ply form.**

PERMIT REQUESTED

- Check off type of Permit Requested, such as structural, HVAC, Electrical or Plumbing.
- Fill in owner's current Mailing Address and Telephone Number.
- If the project will disturb one acre or more of soil, the project is subject to the additional erosion control and stormwater provisions of ch. NR 151 of the WI Administrative Code. Checking this box will satisfy the related notification requirements of ch. NR 216.
- Fill in Contractor and Contractor Qualifier Information. Per s. 101.654 (1) WI Stats., an individual taking out an erosion control or construction permit shall enter his or her dwelling contractor certificate number, and name and certificate number of the dwelling contractor qualifier employed by the contractor, unless they reside or will reside in the dwelling. Per s. 101.63 (7) Wis. Stats., the master plumber name and license number must be entered before issuing a plumbing permit.

PROJECT LOCATION

- Fill in Building Address (number and street or sufficient information so that the building inspector can locate the site).
- Local zoning, land use and flood plain requirements must be satisfied before a building permit can be issued. County approval may be necessary.
- Fill in Zoning District, lot area and required building setbacks.

PROJECT DATA - Fill in all numbered project data blocks (1-14) with the required information. All data blocks must be filled in, including the following:

2. Area (involved in project):
 - Basements - include unfinished area only
 - Living area - include any finished area including finished areas in basements
 - Two-family dwellings - include separate and total combined areas
3. Occupancy - Check only "Single-Family" or "Two-Family" if that is what is being worked on. In other words, do not check either of these two blocks if only a new detached garage is being built, even if it serves a one or two family dwelling. Instead, check "Garage" and number of stalls. If the project is a community based residential facility serving 3 to 8 residents, it is considered a single-family dwelling.
9. HVAC Equipment - Check only the major source of heat, plus central air conditioning if present. Only check "Radiant Baseboard" if there is no central source of heat.
10. Plumbing - A building permit cannot be issued until a sanitary permit has been issued for any new or affected existing private onsite wastewater treatment system.
14. Estimated Cost - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.

SIGNATURE - Sign and date this application form. If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

CONDITIONS OF APPROVAL - The authority having jurisdiction uses this section to state any conditions that must be complied with pursuant to issuing the building permit.

ISSUING JURISDICTION: This must be completed by the authority having jurisdiction.

- Check off Jurisdiction Status, such as town, village, city, county or state and fill in Municipality Name
- Fill in State Inspection Agency number only if working under state inspection jurisdiction.
- Fill in Municipality Number of Dwelling Location
- Check off type of Permit Issued, such as construction, HVAC, electrical or plumbing.
- Fill in Wisconsin Uniform Permit Seal Number, if project is a new one- or two-family dwelling.
- Fill in Name and Inspector Certification Number of person reviewing building plans and date building permit issued.

PLEASE RETURN SECOND PLY WITHIN 30 DAYS AFTER ISSUANCE TO (You may fold along the dashed lines and insert this form into a window envelope.):

Safety & Buildings Division
P O Box 2509
Madison, WI 53701-2509

Cautionary Statement To Owners Obtaining Building Permits

101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:

If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two- family dwelling code or an ordinance enacted under sub. (1) (a), because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

Additional Responsibilities for Owners of Projects Disturbing More One or More Acre of Soil

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

Owner's Signature: _____ Date: _____

Manufactured Home Installers Affidavit

Comm 5.327 Manufactured home installer. (1) GENERAL.

(a) Except as provided in par. (b), beginning on January 1, 2007, pursuant to s. 101.96, Stats., no person may install a manufactured home onto a foundation or other support system unless the person complies with one of the following conditions:

1. The person holds a license issued by the department as a licensed manufactured home installer.
2. The person is under the general supervision of another person who holds a license issued by the department as a licensed manufactured home installer.

(b) 1. The owner of a manufactured home who will reside in the home may install his or her own manufactured home without holding a license as a licensed manufactured home installer. This exemption does not apply to the owner who contracts for or otherwise arranges for the installation.

2. A person is not required to hold a license as a licensed manufactured home installer for electrical, plumbing or HVAC work associated with the installation of a manufactured home.

Note: There may be other state or local licensing requirements involved in the installation of manufactured homes.

Licensed Manufactured Home Installers Name: _____

Licensed Manufactured Home Installer License #: _____