

**Town of Oakdale  
c/o Lakeside Inspections  
8735 Elder Rd,  
Tomah, WI 54660  
608-387-0121  
l.gilles@bldgpermit.com**

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 Monroe County.
2. **County Land-Use Permit** – Monroe County controls the zoning in the Town of Oakdale.
3. **Driveway Permit** – The Town of Oakdale requires driveway permits for access from Town Roads.

***Submit the Following to Lakeside Inspections at the Tomah 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. **Plumbing Installation Affidavit.** - The plumber holding the proper credential must sign this form.
7. **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

**For information or inspections contact  
Larry Gilles / Building Inspector # 70183  
608-387-0121 or visit the web site at  
www.bldgpermit.com**

Wisconsin Division of Safety and Buildings  Wisconsin Stats. 101.63, 101.73		<b>WISCONSIN UNIFORM BUILDING PERMIT APPLICATION</b>				Application No.  Parcel No.																						
<b>PERMIT REQUESTED</b>		<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																												
<b>PROJECT LOCATION</b>		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.																					
<b>1. PROJECT</b>		<b>3. OCCUPANCY</b>		<b>6. ELECTRIC</b>	<b>9. HVAC EQUIP.</b>	<b>12. ENERGY SOURCE</b>																						
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Other:		<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:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Fuel</td> <td style="width:10%;">Nat Gas</td> <td style="width:10%;">LP</td> <td style="width:10%;">Oil</td> <td style="width:10%;">Elec</td> <td style="width:10%;">Solid</td> <td style="width:10%;">Solar</td> </tr> <tr> <td>Space Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar	Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar																						
Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																						
Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																						
<b>2. AREA INVOLVED (sq ft)</b>		<b>4. CONST. TYPE</b>		<b>7. WALLS</b>	<b>10. SEWER</b>	<b>13. HEAT LOSS</b>																						
	<b>Unit 1</b>	<b>Unit 2</b>	<b>Total</b>	<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:	_____ BTU/HR Total Calculated Envelope and Infiltration Losses ("Maximum Allowable Heating Equipment Output" on Energy Worksheet; "Total Building Heating Load" on Rescheck report)																						
Unfin. Bsmt				<b>5. STORIES</b>	<b>8. USE</b>																							
Living Area				<input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other:	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other:																							
Garage				<input type="checkbox"/> Plus Basement																								
Deck																												
Totals						<b>14. EST. BUILDING COST w/o LAND</b>																						
						\$																						
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.																												
<b>APPLICANT (Print):</b> _____ <b>Sign:</b> _____ <b>DATE</b> _____																												
<b>APPROVAL CONDITIONS</b>		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.																										
<b>ISSUING JURISDICTION</b>		<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 _____ - _____																					
<b>FEES:</b>		<b>PERMIT(S) ISSUED</b>		<b>WIS PERMIT SEAL #</b>		<b>PERMIT ISSUED BY:</b>																						
Plan Review      \$ _____ Inspection        \$ _____ Wis. Permit Seal   \$ _____ Other                \$ _____  Total                \$ _____		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control				Name _____  Date _____ Tel. _____  Cert No. _____																						

## 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

(Part of Ply 4 for Applicants)

**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 #: \_\_\_\_\_

## PLUMBING INSTALLATION AFFIDAVIT

PROJECT OWNER: \_\_\_\_\_

PROJECT LOCATION: \_\_\_\_\_

STREET ADDRESS OR LOT # AND SUBDIVISION: \_\_\_\_\_  
\_\_\_\_\_

BUILDING PERMIT NUMBER THAT HAS BEEN ISSUED FOR THIS PROJECT: \_\_\_\_\_

PURSUANT TO WISCONSIN STATE STATUTES 145.06, PARAGRAPHS 1 THROUGH 4, WHICH IN ESSENCE STATES THAT A MASTER PLUMBER MUST BE IN CHARGE OF THE INSTALLATION OF INTERIOR PLUMBING OF A NEW SINGLE FAMILY DWELLING, AND THAT IT IS UNLAWFUL FOR ANY LICENSED MASTER PLUMBER, TO ALLOW THE USE OF HIS LICENSE, DIRECTLY OR INDIRECTLY, FOR THE PURPOSE OF OBTAINING LOCAL PERMITS FOR OTHERS, OR TO ALLOW THE USE OF HIS LICENSE BY OTHERS TO INSTALL PLUMBING WORK, I THE UNDERSIGNED, DO HEREBY STATE THAT I AM IN CHARGE OF THE INSTALLATION OF THE INTERIOR PLUMBING FOR THE NEW SINGLE FAMILY DWELLING LISTED ABOVE.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_

MP NO.: \_\_\_\_\_ DATE: \_\_\_\_\_