



www.sheboyganwi.gov

BUILDING INSPECTION DEPARTMENT
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MOVING & WRECKING PERMIT APPLICATION

APPLICATION DATE: _____

The undersigned hereby applies for a permit according to the following statement:

Location of Structure: _____

Residential – # units: _____ Commercial: _____

Accessory structure(s) must also be moved or wrecked along with the above primary structure.

Owner _____ Address _____

Permit for _____ Cost _____ Permit Fees _____

Contractor _____ Address _____

Remarks: _____

THIS PERMIT EXPIRES 6 MONTHS AFTER ISSUANCE

The undersigned hereby applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions herein set forth in this statement; and is in strict compliance with the building ordinance and other ordinances of the City of Sheboygan and the State Building Code of Wisconsin and to obey any and all lawful orders of the Inspector of Buildings of the City of Sheboygan.

Signature of Representative in appropriate BLOCK below indicates that Service has been disconnected and Utility Property removed from above location.

Name _____

Address _____

<p>CITY OF SHEBOYGAN WATER DEPT. METER</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>	<p>SANITARY SEWER LATERAL</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>
<p>WISCONSIN PUBLIC SERVICE CORP.</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>	<p>STORM SEWER LATERAL</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>
<p>ALLIANT UTILITIES (WP&L)</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>	<p>WATER SERVICE LATERAL</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>
	<p>DEPARTMENT OF PUBLIC WORKS</p> <p>_____</p> <p style="text-align: center;">SIGNATURE</p> <p>Date: _____</p>