

Town of Waukesha

APPLICATION FOR COMMERCIAL BUILDING PERMIT

W250 S3567 Center Road
Phone - 262-490-8270

Date _____

Permit No. _____

Required

Tax Key No. _____

<p>1. Type of Submittal or Service Requested (check all that apply)</p> <p><input type="checkbox"/> New</p> <p><input type="checkbox"/> Alteration - Level 1, 2, 3</p> <p><input type="checkbox"/> Addition/Alteration</p> <p><input type="checkbox"/> Approval Extension</p> <p><input type="checkbox"/> Revision</p> <p><input type="checkbox"/> Revision Following Held Plans</p> <p><input type="checkbox"/> Follow Up of a Denial Within 8 Months</p> <p><input type="checkbox"/> Preliminary Consultation (contact reviewer before scheduling or submitting)</p> <p><input type="checkbox"/> Footing & Foundation Plans Only</p> <p><input type="checkbox"/> Structural Framework – Shell Only</p> <p><input type="checkbox"/> Permission to Start</p> <p><input type="checkbox"/> Multiple Identical Buildings (see box 5) Number of Buildings _____</p> <p>Objects Submitted for Review (check all that apply)</p> <p><input type="checkbox"/> Building</p> <p style="margin-left: 20px;"><input type="checkbox"/> Membrane Construction</p> <p style="margin-left: 20px;"><input type="checkbox"/> Canopy</p> <p style="margin-left: 20px;"><input type="checkbox"/> Elevated Pedestrian Access</p> <p style="margin-left: 20px;"><input type="checkbox"/> Historical Building—Review per COMM 70 Structure</p> <p style="margin-left: 20px;"><input type="checkbox"/> Bleacher</p> <p style="margin-left: 20px;"><input type="checkbox"/> Stand Alone Bleacher (not part of building project)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Rack Supported Storage Building</p> <p><input type="checkbox"/> Building & HVAC</p> <p><input type="checkbox"/> HVAC</p> <p><input type="checkbox"/> HVAC Alone (no related bldg submittal)</p> <p><input type="checkbox"/> Kitchen Exhaust Hood</p> <p><input type="checkbox"/> Fire Suppression (see box 7)</p> <p><input type="checkbox"/> Fire Detection/Alarm (see box 7)</p> <p>Structural Component Plan(s) which accompany this submittal (check all that apply):</p> <p><input type="checkbox"/> Roof Truss <input type="checkbox"/> Metal Bldg</p> <p><input type="checkbox"/> Floor Truss <input type="checkbox"/> Fire Escape</p> <p><input type="checkbox"/> Steel Girder <input type="checkbox"/> Precast Plank</p> <p><input type="checkbox"/> Laminated Wood <input type="checkbox"/> Precast Wall</p>	<p>2. Occupancy Type</p> <p>Major Use – Check Use with the Greatest Floor Area</p> <p><input type="checkbox"/> A Assembly A1 A2 A3 A4 A5</p> <p><input type="checkbox"/> B Business/Office B</p> <p><input type="checkbox"/> E Educational E</p> <p><input type="checkbox"/> F Factory/Industrial F1 F2</p> <p><input type="checkbox"/> H Hazardous H1 H2 H3 H4 H5</p> <p><input type="checkbox"/> I Institutional/Daycare/CBRF I1 I2 I3 I4</p> <p><input type="checkbox"/> M Mercantile/Retail M</p> <p><input type="checkbox"/> R Residential R1 R2 R3 R4</p> <p><input type="checkbox"/> S Storage S1 S2</p> <p><input type="checkbox"/> U Utility/Misc U</p> <p>Additional Non-Accessory Occupancies – Circle All that Apply)</p>	<p>3. Construction Information</p> <p>Construction Class – Circle One</p> <p>IA IB IIA IIB IIIA IIIB IV VA VB</p> <p>Area (project area, include all levels): _____ sq ft</p> <p>Number of Floor Levels _____</p> <p>Total Building Volume is less than 50,000 Cu. Ft. ___Yes ___No</p> <p>Seismic Review Threshold (circle one)</p> <p>1. B-F and greater than 1 story 2. A or 1 story</p> <p>3. Non-Structural Alteration</p>
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4. Project Information

Project/Site Name _____

Address _____

Retail Value \$ _____

Contact Person: _____

Phone: _____

Fax: _____

DESIGNER INFORMATION:

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

Check others if applicable First Time Submitter ___Yes ___No

Designer of ___Bldg ___HVAC, ___Fire Alarm ___Fire Suppression ___Owner

Designer A/E # _____

Supervising Professional A/E # _____ of ___Bldg ___HVAC

CONTRACTOR INFORMATION:

Company Name _____

Contact Person _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number _____ Fax _____ E-Mail _____

PROPERTY OWNER (not leasee) INFORMATION:

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

OTHER:

First Name _____ Last Name _____ Customer Number _____

Company Name _____

Address _____

City _____ State _____ Zip+4 (9 digits) _____

Phone Number (area code) _____ Fax _____ E-Mail _____

7. Fire Protection (Check System Type That Applies)

Fire suppression and alarm plans are required for certain occupancies. See building approval letter or contact us for requirements. When required, the plans for fire sprinkler, fire detection, and fire alarm must be submitted to the office indicated on your building plan approval letter. Please include the original building transaction number on the second line of page 1, upper right hand box. Do not submit fire suppression or fire alarm plans together with building or HVAC plans. A separate application form and plan sets are required.

Fire Alarm:

Complete Partial None
 Type: Automatic Detection Manual Alarm

Monitoring Type:

Central Station Proprietary Supervision
 Remote Supervision Protected Premises

Fire Suppression:

Complete Partial None
 Type: Wet Dry Pre-action/Deluge
 Anti-Freeze Manual Wet

Monitoring Type:

Central Station Proprietary Supervision
 Remote Supervision Protected Premises

NFPA Fire Suppression Standards used

11 11A 12 13 13R
 14 15 16 17 17R
 17A 20 22 24 750
 2001 Other _____

8. Other Potential Plan Submittals Required For A Project?

- Petition for Variance – Submit form SBD-9890
- Plumbing and private sewage systems under chapters Comm 81-85
- Elevators or Escalators under chapter Comm18
- Swimming Pools or other Aquatic Centers within a Commercial/Public Facility under chapter Comm 90
- Tank storage of 5,000 gallons or more of flammable or combustible liquids under chapter Comm 10
- There is no state electrical review

Contact S&BD for individual submittal requirements for all of the above.

For licensing of Hotels, Motels, Restaurants, Pools, Campgrounds and Bed & Breakfast establishments contact the WI Environmental Sanitation Section at (608) 266-2835. The Wisconsin Permit Center at 1-800-435- 7287 may be able to help you with other state permit requirements.

Note: Be aware that State Plan Review & Approval is separate from Local Permits. Always check with the local municipality and county for their requirements.

9. Required Signatures

<p>a) SUPERVISING PROFESSIONALS If building will be 50,000 cu ft or greater (Comm 61.50) I have been retained by the owner as the supervising professional per Comm 61.50 for the performance of the supervision of reasonable on-the-site observations to determine if the construction is in substantial compliance with the approved plans and specifications. Upon completion of construction, I will file a written statement with the Department and municipality certifying that, to the best of my knowledge and belief, construction has or has not been performed in substantial compliance with the approved plans and specifications. In the event that I am no longer associated with this project I will file a compliance statement (SBD-9720) notifying the Department as such and indicating the current status of compliance.</p> <p>Supervising Professional's Signature _____ () Building () Hvac Date _____</p> <p>Supervising Professional's Signature _____ () Building () Hvac Date _____</p> <p>Supervising Professional's Signature _____ () Building () Hvac Date _____</p> <p>Supervising Professional's Signature _____ () Building () Hvac Date _____</p>						
<p>b) COMPONENT SUBMITTAL The Department requires that the project designer review individual component submittals for compliance with the general design concept. The project designer, and department, will rely on the seal of the component designers for compliance with the codes as they apply to their designs.</p> <table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 50%;">_____</td> <td style="border: none; width: 20%;">_____</td> <td style="border: none; width: 30%;">_____</td> </tr> <tr> <td style="border: none;">Original Signature of Building Designer</td> <td style="border: none;">Date Signed</td> <td style="border: none;">Name of Component Fabricator</td> </tr> </table>	_____	_____	_____	Original Signature of Building Designer	Date Signed	Name of Component Fabricator
_____	_____	_____				
Original Signature of Building Designer	Date Signed	Name of Component Fabricator				
<p>c) Optional Service-Permission to start requested – Be sure to check box under Building Submittal Type on front page) <input type="checkbox"/> As the owner, I request to begin footing and foundation work PRIOR to plan review approval. I agree to make any changes required after plans have been reviewed, and to remove or replace any non-code complying construction. I will not permit construction above the foundation until approved plans are at the site.</p> <p>(Additional \$50.00 Fee per building) Request is for the following buildings: _____</p> <p>Owner's Signature _____ Date _____</p>						

10. Statements of Owners and Designer

<p>a) OWNERS Statement The owner indicated on page 1 requests that plans be reviewed for compliance with the code requirements set forth in Chapters Comm 61 to 65 of the department. The owner recognizes responsibility for compliance with all the code requirements and any conditions of approval. If a building is 50,000 cubic feet in total volume or greater, plans are required to be prepared, signed, sealed and dated by a Wisconsin registered engineer or architect (Comm 61.31). Signatures and seals affixed to the plans shall be original.</p>
<p>b) DESIGNERS Statement (Comm 61.20, 61.31 (1), and 61.50) The designer indicated on page 1 of this form is responsible for preparing or supervising the preparation of the plans to the best of his/her knowledge to comply with the applicable codes of the Division of Safety & Buildings for this submittal. If a building, following construction of this project, contains more than 50,000 cubic feet in volume, plans are required to be prepared, signed, sealed and dated by a Wisconsin registered engineer, architect, or designer (Comm 61.31(1)). Signatures and seals affixed to the plans shall be original.</p>