

COMMERCIAL BUILDING PERMIT APPLICATION

CITY OF JANESVILLE - BUILDING DIVISION, DEPARTMENT OF PUBLIC WORKS

18 N. JACKSON ST., P.O. BOX 5005

JANESVILLE, WI 53547-5005

PERMIT # _____

PARCEL # _____

PERMIT REQUESTED: BUILDING _____ FOUNDATION _____

OWNER'S NAME AND ADDRESS _____

CONTACT PERSON & TELEPHONE NO. _____

Email Address: _____

CONTRACTOR'S NAME AND ADDRESS _____

CONTACT PERSON & TELEPHONE NO. _____

Email Address: _____

PROJECT LOCATION - BUILDING ADDRESS _____ SUITE # _____

(Complete this section for buildings less than 50,000 Cu. Ft.)

DESIGNER'S NAME: _____

PROJECT - SCOPE OF WORK _____

ADDRESS: _____

TELEPHONE NO.: _____

Sprinklered Type
() Partial () Complete () None

Zoning District _____

Lot Area _____

Setbacks Front Sq. Ft. _____

Rear _____

Left _____

Right _____

BUILDING SERVICES USE ONLY

Fire Alarm
() Partial () Complete () None

BUILDING OCCUPANCY TYPE

Major Use - Check Use With the Sub Uses - Circle Uses In

Greatest Floor Area This Building

- () A Assembly A1 A2 A3 A4 A5
- () B Business/Office B
- () E Educational E
- () F Factory/Industrial F1 F2
- () H Hazardous H1 H2 H3 H4 H5
- () I Institutional/Daycare/CBRF I1 I2 I3 I4
- () M Mercantile/Retail M
- () R Residential R1 R2 R3 R4
- () S Storage S1 S2
- () U Utility/Misc. U

NEW or ALTERED AREA (sq.ft.)

- Basement _____
- Ground Floor _____
- 1st Floor _____
- 2nd Floor _____
- 3rd Floor _____
- Adtnl. Floor _____
- Acces. Bldg. _____
- Total _____ sq. ft.

Permit Costs:

- Plan Review _____
- Curb Opening _____
- Building Fees _____
- Occupancy _____
- Other _____

TOTAL \$ _____

Permit Issued By:

Name: _____
Date: _____
Certification No.: _____

PROJECT
NEW _____ ADTN. _____
ALTERATION _____ MOVE _____
FOUNDATION _____
OTHER: _____

CONSTRUCTION CLASS
____ IA _____ IIIB
____ IB _____ IV
____ IIA _____ VA
____ IIB _____ VB
____ IIIA _____

The applicant agrees to comply with the Wisconsin Administrative Codes and the City of Janesville General Ordinances and with the conditions of this permit understands that the issuance of the permit creates no legal liability, expressed or implied, on the City of Janesville. The applicant certifies the information submitted is accurate. The applicant agrees to allow the Building & Development Services and Fire Department personnel the right to inspect the property for code compliance during normal business hours. The applicant states that he/she has the property owner's authority to execute this agreement and permit.

CHANGE OR NEW OCCUPANCY?
_____ Yes _____ No

ESTIMATED COST OF PROJECT
\$ _____

Print or Type Name: _____

DATE SUBMITTED _____

Signature of Applicant: _____



CITY OF JANESVILLE

Wisconsin's Park Place

Pre-Occupancy Contractor Verification Form

This Form Shall be Completed/Submitted BEFORE your Occupancy Inspection will be scheduled.

Name: _____	Email: _____
Phone Number: _____	Site Address: _____
Signature: _____	Project Description: _____

FINAL INSPECTION VERIFICATION:

- Final Electrical Inspection** Passed on _____ (date)
- Final Plumbing Inspection** Passed on _____ (date)
- Final HVAC Inspection** Passed on _____ (date)
- Fire Department witnessed Alarm testing** Passed on _____ (date)
- Fire Department witnessed Smoke Detector testing** Passed on _____ (date)
- Fire Department witnessed Sprinkler testing** Passed on _____ (date)
- Site Work & Landscaping** inspected and approved _____ (date) (The contact person for site inspection can be found on your Site Plan Review letter.)
- Re-inspection Fee(s)** paid on _____ (date). Re-inspect fees shall be paid prior to scheduling an occupancy inspection.
- Occupant Load is Posted in the space(s)** (for Assembly Uses only)

DOCUMENTATION:

- Submitted a **.dwg and pdf file of as-built” Utility Plan** to millerv@janesvillewi.gov on _____ (date)
- Submitted a **pdf file of Final Building Plan** (when changes from originally submitted plans have taken place) to millerv@janesvillewi.gov on _____ (date)
- Stormwater Maintenance Agreement (if applicable) submitted to yunkerj@janesvillewi.gov and kienbauma@janesvillewi.gov on _____ (date). If applicable, attach **Stormwater Management** letter of compliance from a qualified individual for all engineered soil systems.
- Attach **Building & HVAC Supervising Professional Compliance Statements**.
- Items of Deficiency** must be listed and attached to the Contractor Compliance Statements.

EMAIL this completed form and supporting documentation for Building Division review to both:

Dan Paul pauld@janesvillewi.gov and Londa Rusch ruschl@janesvillewi.gov

SCHEDULING: When the above checklist is completed, you may schedule an occupancy inspection.

- The Building Division will contact you to schedule the “Occupancy Inspection” on a Tuesday or Thursday. This will be a joint inspection by a Commercial Building Inspector and COJ Fire Inspector.
- Inspector(s) will provide a written “Occupancy Inspection Report”. If no deficiencies are noted, a Certificate of Occupancy will be issued.
- Occupancy Re-inspection Fee(s) will be assessed in accordance with Building Division Policy and must be paid before receiving an Occupancy Certificate.
- Temporary Occupancy may be granted by the code officials when deemed appropriate.