

Parcel # _____

Permit# _____

TOWN OF VINLAND BUILDING PERMIT

OWNERS NAME _____ PHONE _____

PROJECT ADDRESS _____

CONTRACTORS NAME _____ PHONE _____

CONTRACTORS ADDRESS _____ FAX _____

TYPE OF OCCUPANCY _____ SQ. FOOT OF PROJECT _____

PROJECT DESCRIPTION _____ JOB COST \$ _____

CONDITIONS OF APPROVAL _____

- **POSSESS AND POST REQUIRED ZONING & BUILDING PERMITS** BEFORE STARTING ANY CONSTRUCTION ON ADDITIONS, DECKS, ETC.
- PROPERTY PINS EXPOSED ON THE FIRST INSPECTION FOR ANY ADDITIONS OR NEW CONSTRUCTION
- ROAD CLEAN UP IS THE RESPONSIBILITY OF THE OWNER/CONTRACTOR ON THE SAME DAY
- ALL WORK TO MEET THE STATE CODES OR RE-INSPECTION FEES WILL BE CHARGED FOR IMPROPER INSTALLATIONS
- **THE OWNER/CONTRACTOR IS RESPONSIBLE FOR MAKING ARRANGEMENTS FOR THE FINAL INSPECTION**

REQUIRED INSPECTIONS

ADDITIONAL PERMITS

ADDITIONAL INSPECTIONS

_____ FOUNDATIONS (ADDITIONS & DECKS)

_____ FRAMING _____

ELECTRICAL _____

_____ INSULATION _____

HVAC _____

_____ FINAL _____

PLUMBING _____

OWNER/CONTRACTOR _____ LICENSE # _____ DATE _____

INSPECTOR _____ DATE _____

Checks should be made out and mailed to: **Town of Vinland
8348 County Rd. T
Larsen, WI 54947**

Tom Spierowski, Building Inspector
920-428-3361

County Zoning Permit Required _____ Yes _____ No

Total Fees \$ _____