



Application is for
T.I.D. Program

CITY OF RACINE • DEPARTMENT OF CITY DEVELOPMENT • DIVISION OF BUILDING INSPECTION
730 WASHINGTON AVENUE • ROOM 304 • RACINE WISCONSIN 53403 • PHONE 262 636 9464 • FAX 262 636 9142

Building Permit Application

Owner Information:

Name: _____ Phone Number: (____) _____
Mailing Address: _____ Fax Number: (____) _____
City, State, Zip Code: _____ Email Address: _____
Project Site Address: _____ Tax Parcel Number: _____

Owner/Occupier acting as General Contractor (MUST SIGN CAUTIONARY STATEMENT). Per Wisconsin Stat. § SPS 320.09(9)(a)3. An owner/occupier of a 1 or 2-family home or a Wisconsin Licensed Contractor can apply for permits.

General Contractor Information:

Contact Name: _____ Phone Number: (____) _____
Mailing Address: _____ Fax Number: (____) _____
City, State, Zip Code: _____ Email Address: _____

Contractor must provide a DSPS copy of both their Dwelling Contractor License and Dwelling Contractor Qualifier License attached to this application (Only required for 1 and 2-family dwellings).

1) Proposed Project: (One project per permit application)

Construction Drawings Required for: Additions, Remodels, Curb Cuts and Accessory Structures

Site Plan Required for: Additions, Accessory Structures and Street Storage

- Commercial: New Addition Remodel Demo Paving
- Industrial: New Addition Remodel Demo Paving
- Residential: New Addition Remodel Demo
- Roofing: New
- Siding: New
- Curb Cut: New
- Dumpster/Street Storage: Number of Days to be Stored on Street: _____
- Accessory Structure:

Covered Patio	Deck (no roof)	Fence	Garage	Gazebo
Pergola	Playhouse	Pool	Porch	Shed

2) Brief Project Description:

3) Estimated Cost of Project: \$ _____ 4) Square Footage of Project: _____

Note: ANY WORK DONE WITHOUT PERMITS MAY RESULT IN DOUBLE PERMIT FEES.

Per Sec. 18-93 all building permits are valid for a period of eighteen (18) months from date of issuance.

The undersigned hereby makes application for this permit to do the work herein described and as shown on the attached Construction Plans, Site Survey, and hereby agree that all work will be done in accordance with all applicable codes and ordinances of the State of Wisconsin, and the City of Racine.

Owner/Contractor Name: _____

Owner/Contractor Signature: _____ Date: ____/____/____