



La Crosse Fire Department

Division of Community Risk Management

inspection@cityoflacrosse.org 608-789-7530

<http://www.cityoflacrosse.org/your-government/departments/fire-department>



NEW 1 & 2 FAMILY RESIDENTIAL

Plan Requirements:

All plans shall be drawn to scale of not less than one-quarter (1/4) inch per foot. Drawings must be to scale and accurately figured. Drawings that do not show all necessary details will not be approved.

Minimum set of plans shall consist of:

- Floor plans, elevations, cross-sections, and all construction details.
- Structural calculations for trusses, I joist, complex microlam members when required.

NOTE: Pencil drawings are not acceptable, photo copy drawings are acceptable.

Data Requirements:

- Two complete sets of plans to scale. A set electronic and paper or both sets electronic.
- One heat loss calculation with furnace model, serial number and BTU's indicated
- Truss calculations at time of framing if required
- Erosion control application
- State of Wisconsin application
- Elevation Certificate if required
- Lot survey or accurate site plan showing proposed building location

If you would like to submit the permit application electronically, please upload the forms and email them to inspection@cityoflacrosse.org

How long does it take to get my permit?

Permits are reviewed on a first come, first serve basis. Inspectors are allowed 10 business days to complete. They may take longer depending on circumstances. For an additional cost you can EXPEDITE your application, moving it to the forefront

How much does a permit cost?

Building Permit Fees can be found on the City website at this link <https://www.cityoflacrosse.org/fire/fees/buildings>.

How close to the lot-line can I build my new home?

In most areas, you must stay 20% of the lot depth or a minimum of 15' (maximum of 30') from the rear lot line and 6' from the side lot lines and 25' from the front lot lines. CALL US TO MAKE SURE if your project is close to these parameters. SOME AREAS DO HAVE DIFFERENT SETBACK RULES. You may want to bring in your survey before you begin designing your home.

Can I do my own electrical wiring?

No. Local law requires a licensed contractor to perform electrical wiring. An electrical permit is required.

Can I do my own plumbing work?

No. Local law requires a licensed contractor to perform plumbing work. A plumbing permit is required. Contact CRM with questions.

Can I do my own HVAC work?

Local law requires a licensed contractor to perform any gas work and a permit will be required. Contact Community Risk Mgmt with questions.

What do I do with the card I received with the building permit?

The yellow permit card should go in a window or where it can be seen from the street

When must I call for building inspections?

Inspections are required:

- After excavation, before placing concrete
- After foundation is formed, before placing concrete
- After foundation is built but before backfilling
- When rough carpentry is erected. You must first have plumbing rough in inspected and electrical rough in inspected and approved. THEN CALL FOR FRAMING INSPECTION. The Building Inspector cannot approve framing prior to electrical and plumbing rough inspection/approvals.
- When insulation is completely installed before dry-wall begins.
- Final inspection of plumbing, electrical, HVAC and building before occupancy.

Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73		<h2 style="margin:0;">Wisconsin Uniform Building Permit Application</h2> <p style="margin:0; font-size: small;">Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]</p>				Application No. _____ Parcel No. _____																									
PERMIT REQUESTED		<input type="checkbox"/> Constr. <input type="checkbox"/> HVAC <input type="checkbox"/> Electric <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control <input type="checkbox"/> Other: _____																													
Owner's Name _____			Mailing Address _____			Tel. _____																									
Contractor Name & Type _____		Lic/Cert# _____	Exp Date _____	Mailing Address _____		Telephone & Email _____																									
Dwelling Contractor (Constr.) _____		_____	_____	_____		_____																									
Dwelling Contr. Qualifier (The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.) _____		_____	_____	_____		_____																									
HVAC _____		_____	_____	_____		_____																									
Electrical Contractor _____		_____	_____	_____		_____																									
Electrical Master Electrician _____		_____	_____	_____		_____																									
Plumbing _____		_____	_____	_____		_____																									
PROJECT LOCATION		Lot area _____ Sq.ft. <input type="checkbox"/> One acre or more of soil will be disturbed	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City of _____		_____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E/W																										
Building Address _____			County _____		Subdivision Name _____		Lot No. _____ Block No. _____																								
Zoning District(s) _____		Zoning Permit No. _____		Setbacks: Front _____ ft. Rear _____ ft. Left _____ ft. Right _____ ft.																											
1. PROJECT <input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Other: _____		3. OCCUPANCY <input type="checkbox"/> Single Family <input type="checkbox"/> Two Family <input type="checkbox"/> Garage <input type="checkbox"/> Other: _____		6. ELECTRIC Entrance Panel Amps: _____ <input type="checkbox"/> Underground <input type="checkbox"/> Overhead 7.WALLS <input type="checkbox"/> Wood Frame <input type="checkbox"/> Steel <input type="checkbox"/> ICF <input type="checkbox"/> Timber/Pole <input type="checkbox"/> Other: _____		9. HVAC EQUIP. <input type="checkbox"/> Furnace <input type="checkbox"/> Radiant Basebd <input type="checkbox"/> Heat Pump <input type="checkbox"/> Boiler <input type="checkbox"/> Central AC <input type="checkbox"/> Fireplace <input type="checkbox"/> Other: _____ 10. SEWER <input type="checkbox"/> Municipal <input type="checkbox"/> Sanitary Permit# _____ 11. WATER <input type="checkbox"/> Municipal <input type="checkbox"/> On-Site Well		12. ENERGY SOURCE <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <th>Fuel</th> <th>Nat Gas</th> <th>LP</th> <th>Oil</th> <th>Elec</th> <th>Solid</th> <th>Solar Geo</th> </tr> <tr> <td>Space Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Water Htg</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Fuel	Nat Gas	LP	Oil	Elec	Solid	Solar Geo	Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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2. AREA INVOLVED (sq ft) <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <tr> <th></th> <th>Unit 1</th> <th>Unit 2</th> <th>Total</th> </tr> <tr> <td>Unfin. Bsmt</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Living Area</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Garage</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Deck/ Porch</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Totals</td> <td></td> <td></td> <td></td> </tr> </table>			Unit 1	Unit 2	Total	Unfin. Bsmt				Living Area				Garage				Deck/ Porch				Totals				4. CONST. TYPE <input type="checkbox"/> Site-Built <input type="checkbox"/> Mfd. per WI UDC <input type="checkbox"/> Mfd. per US HUD 5. STORIES <input type="checkbox"/> 1-Story <input type="checkbox"/> 2-Story <input type="checkbox"/> Other: _____ <input type="checkbox"/> Basement		13. HEAT LOSS _____ BTU/HR Total Calculated Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)			
	Unit 1	Unit 2	Total																												
Unfin. Bsmt																															
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Totals																															
				14. EST. BUILDING COST w/o LAND \$ _____																											
<p>I understand that I: am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.</p> <p><input type="checkbox"/> I vouch that I am or will be an owner occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the second page of this form.</p>																															
APPLICANT (Print): _____ Sign: _____ DATE _____																															
APPROVAL CONDITIONS		This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. <input type="checkbox"/> See attached for conditions of approval.																													
ISSUING JURISDICTION		<input type="checkbox"/> Town of _____ <input type="checkbox"/> Village of _____ <input checked="" type="checkbox"/> City of La Crosse		<input type="checkbox"/> County of _____ <input type="checkbox"/> State _____		State-Contracted Inspection Agency#: _____ Municipality Number of Dwelling Location _____																									
FEES:		PERMIT(S) ISSUED		WIS PERMIT SEAL #		PERMIT ISSUED BY:																									
Plan Review \$ Inspection \$ Wis. Permit Seal \$ Other \$ Total \$		<input type="checkbox"/> Construction <input type="checkbox"/> HVAC <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Erosion Control		_____ _____ _____		Name _____ Date _____ Tel. _____ Cert No. _____ Email: _____																									



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APPLICATION FOR RESIDENTIAL BUILDING PERMIT



Application Number: _____ Date: _____ Parcel Number: _____

OWNER INFORMATION							
Name: _____							
Address of above: Street		City		State		Zip Code	
Phone: _____		Cell: _____		Email: _____			
CONTRACTOR INFORMATION							
Name: _____							
Address of above: Street		City		State		Zip Code	
Phone: _____		Cell: _____		Email: _____			
PROJECT INFORMATION							
Project address: _____							
Construction Cost: \$ _____		Fence Only: Height: _____ Material: _____		Description of Work If Demolition, include use of land after demolition			
Project Type: Building <input type="checkbox"/> Addition <input type="checkbox"/> Sign <input type="checkbox"/> Alteration/Remodel <input type="checkbox"/> Demolition <input type="checkbox"/> Accessory <input type="checkbox"/>							
PROPERTY INFORMATION							
Zoning	Nbr. Dwelling Units	Owner Occ <input type="checkbox"/> Rental <input type="checkbox"/>	Airport Height Yes <input type="checkbox"/> No <input type="checkbox"/>	Flood Plain Yes <input type="checkbox"/> No <input type="checkbox"/>	Fire Limits Yes <input type="checkbox"/> No <input type="checkbox"/>	Archaeological District Yes <input type="checkbox"/> No <input type="checkbox"/>	Historical Dist Yes <input type="checkbox"/> No <input type="checkbox"/>
FEE INFORMATION							
Plan Review: \$ _____	Permit: \$ _____	Record Mtce: \$ _____	Expedited: \$ _____	Started w/o permit: \$ _____	Exempt: <input type="checkbox"/>	Other: \$ _____	Total: \$ _____

IT IS HEREBY AGREED between the applicant, as owner, owner's agent or servant, and the City of La Crosse that for and in consideration for the premises and of the permit to construct, erect, alter, move, raze, or install and the occupancy of a building adding or property as above described, to be issued and granted by Fire Prevention and Building Safety of the City of La Crosse, that the work thereon will be done in accordance with the descriptions set forth in this statement, and as more fully described in the specifications and plans herewith filed and it is further agreed to construct, erect, alter, move, raze or install and occupy in strict compliance with the ordinances of the City of La Crosse, and to obey any and all lawful orders of Fire Prevention and Building Safety of the City of La Crosse and State of Wisconsin laws relating to the construction, alteration, repairs, removal and safety buildings and other structures and permanent building equipment.

Agent/Contractor: (Print) _____ (Sign) _____ (Date) _____

_____ -DCQ _____ -DC

Expires ____/____/____ Expires ____/____/____

Owner: (Print) _____ (Sign) _____ (Date) _____

OFFICE USE ONLY		
Application Approved:	Inspector:	Date:

CAUTIONARY STATEMENT TO OWNERS OBTAINING BUILDING PERMITS

101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:

If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s. 101.654 (2) (a), the following consequences might occur:

(a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

(b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two- family dwelling code or an ordinance enacted under sub. (1) (a), because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

CAUTIONARY STATEMENT TO CONTRACTORS FOR PROJECTS INVOLVING BUILDING BUILT BEFORE 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608)261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance.

WETLANDS NOTICE TO PERMIT APPLICANTS

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE OF SOIL

I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management standards, and will comply with those standards.

Owner: _____ (Print Name) _____ (Sign) _____ (Date)

Owner: _____ (Print Name) _____ (Sign) _____ (Date)

OFFICE USE ONLY		
For Permit Number:	Inspector:	Date: