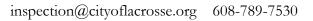


# La Crosse Fire Department

# Division of Community Risk Management





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

# **RE-SIDING**

# Do I need a building permit?

Yes — if you are in the floodplain.

#### How much will it cost? \$0

## How do I obtain a permit?

Email the forms to inspection@cityoflacrosse.org or drop-off to Community Risk Management the following:

- Supply the type of siding to be installed, type of water-resistive barrier to be installed, flashing type, whether you are removing the existing siding material and whether you are applying over existing siding materials.
- Provide a copy of the manufacturer's specifications (if required).

**NOTE:** If the home owner does not hire a contractor to perform work under the building permit that is bonded and insured, a Cautionary Statement must be signed and submitted with the application. *(SEE ATTACHED FORM)* 

## Where can I put a dumpster?

Generally, the dumpster can be placed on your property. If placed on a public property or in the right-of-way/street a Dumpster Permit is required from the Engineering Department.

## When must I call for inspections?

Inspections are required at the following times:

- After water-resistive barrier and flashing are installed, prior to installing siding materials.
- When the project is complete

#### Frequently encountered issues:

Following is a list of frequent problems or errors we encounter:

- No water-resistive barrier and flashing inspection
- No final inspection

The property owner is responsible for correct placement of structures upon a parcel of land to comply with the building and zoning law. The back edge of the City sidewalk is usually located on a property line.

Be sure to call Digger's Hotline prior to digging. The number is 1-800-242-8511.



# La Crosse Fire Department

Division of Community Risk Management



inspection@cityoflacrosse.org 608-789-7530

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

APPLICATION FOR RESIDENTIAL BUILDING PERMIT

| Application Number:                                 |   |   | Date:                                      |                               |                               |   | Parcel Number:                       |  |                               |                  |                   |                          |                        |
|---|---|---|--|-------------------------------|-------------------------------|---|--------------------------------------|--|-------------------------------|------------------|-------------------|--------------------------|------------------------|
| OWNER I   | NFORMAT   | ION   |  |                               |                               |   |                                      |  | -                             |                  |                   |                          |                        |
| Name:   |   |   |  |                               |                               | -   |                                      |  |                               |                  |                   |                          |                        |
| Address of abo                                      | we: Street  |   |  | C                             | lity                          |   |                                      |  | State                         |                  |                   |                          | Zip Code               |
| Phone:  |   |   | Cell:                                      |                               |                               |   | Email:                               |  |                               |                  |                   |                          |                        |
| CONTRA  | CTOR INFO   | DRMATI                                      | ON   |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Name:   |   | JAWAIN                                      | UIN  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
|   |   |   |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Address of abo                                      | we: Street  |   |  | C                             | lity                          |   |                                      |  | State                         |                  |                   |                          | Zip Code               |
| Phone:  |   |   | Cell:                                      |                               |                               |   | Email:                               |  |                               |                  |                   |                          |                        |
|   |   |   |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| PROJECT<br>Project addres                           | INFORMA   | TION  |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Froject addres                                      | s.  |   |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Construction (                                      | Cost:   | Fence Onl                                   | y:   |                               |                               | iption of Work<br>dition, include use of land   | after demoli                         | tion   |                               |                  |                   |                          |                        |
| \$  |   | Height:<br>Material:                        |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Project Type:                                       |   |   |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| Building 🔲 Ad                                       | Idition Demolition  |   | n/Remodel                                  | ב                             |                               |   |                                      |  |                               |                  |                   |                          |                        |
| PROPERT   | YINFORM   |   | 1.00                                       |                               | 1000                          |   |                                      |  | 20.22                         | 1                |                   |                          |                        |
| Zoning  | the second se | elling Units                                | Owner (                                    | Dec                           | 1                             | Airport Height  | Flood                                | Plain  | Fire Li                       | imits            | Archaeo           | logical District         | Historical Dist        |
|   |   |   | Rental                                     |                               |                               | Yes 🗋 No 🗖  | Yes [                                | No 🗆   | Yes                           | No 🗖             | Yes 🗌             | No 🗖                     | Yes No                 |
| FEE INFO  | ORMATION  | J   |  |                               |                               |   |                                      |  |                               |                  |                   | 2 2 3                    |                        |
| Plan Review:<br>\$                                  | Permit:<br>\$   | Record<br>S                                 | Mtce:                                      | Exped<br>S                    | ited:                         | Started w/o<br>\$   | permit:                              | Exempt   |                               | Other:<br>S      |                   | Total:<br>S              |                        |
| adding or property as a<br>specifications and plans | bove described, to be issu<br>herewith filed and it is fu   | ed and granted by F<br>rther agreed to cons | fire Prevention an<br>truct, erect, alter, | id Building S<br>move, raze o | afety of the<br>r install and | rosse that for and in considers<br>Gity of La Crosse, that the we<br>occupy in strict compliance w<br>safety buildings and other stru | ork thereon will<br>with the ordinan | be done in according to the city of the Ci | rdance with t<br>f La Crosse, | the descriptions | set forth in this | statement, and as more f | fully described in the |
|   | Agent/Contr   | actor: (Prin                                | nt)  |                               |                               | (Sign)  |                                      |  | (Date                         | e)               |                   |                          | -                      |
|   |   |   |  |                               |                               | DCQ   |                                      |  |                               |                  |                   | DC                       |                        |
|   |   | Expires                                     | /  | _!                            |                               |   |                                      | Expires  | /                             | /                |                   |                          |                        |
|   | Owner: (Prin  | at)   |  |                               |                               | (Sign)  |                                      |  | (Dati                         | 2)               |                   |                          | -                      |
|   | owner. (rm  |   |  |                               |                               | (orgir)   |                                      |  | (Date                         | ()               |                   |                          |                        |
| OFFICE US   | E ONLY  |   | 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1     |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |
| pplication Appr                                     |   |   |  |                               |                               |   | Insp                                 | ector:   |                               |                  |                   | Date:                    |                        |
|   |   |   |  |                               |                               |   |                                      |  |                               |                  |                   |                          |                        |

# Re-Siding Additional Information

| <b>RE-SIDING ADDITIONAL INFORMATION</b> |   |
|---|---|
| Underlayment Type:                      |   |
|   |   |
|   |   |
| Flashing Material:                      |   |
|   |   |
| Flashing Type:                          |   |
|   |   |
|   |   |
| Existing Materials Removed?             | Applying Over Existing Siding Material? |
| 🗆 Yes 🗆 No                              | □ Yes □ No                              |
|   |   |

# 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: |
|                    |            |       |
|                    |            |       |