BUILDING INSPECTION
201 DELAFIELD STREET
WAUKESHA, WISCONSIN 53188-3633
TELEPHONE 262-524-3530

DEMO/RAZE PERMIT APPLICATION

Return completed application and supporting documents to: buildingpermits@waukesha-wi.gov

Job Address: _____
(Please include Suite No./Apt No. when applicable)

Project Description: _____

Who is submitting this application? *(Please check one)*

☐ Contractor

☐ Property owner *(Note: Only homeowners that reside at the job address may submit applications)*

Contracting Company Name _____

Contractor's Name _____

Address _____ City_____ State_____ Zip _____

Phone _____ Email _____

Property Owner's Information

Name _____

Address _____ City_____ State_____ Zip _____

Phone _____ Email _____

Type of Building: ☐ Single-Family ☐ Two-Family ☐ Commercial building

What is being Demo/Razed:

☐ Entire Building (Raze) ☐ Portion of Building ☐ Interior associated with future alteration

Total sf of area to be demolished: _____ sq. ft.

Will there be any asbestos removal? ☐ Yes ☐ No

Estimated Cost: _____

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PLEASE READ

The undersigned hereby applies for a permit to do work herein described according to the plans and specifications filed herewith. The undersigned agrees that such work will be done in accordance with the said descriptions, plans and specifications in compliance with the building, zoning and health ordinances and all other ordinances of the City of Waukesha and with all laws and orders of the State of Wisconsin applicable to said premises.

The undersigned further applies for a permit to occupy the premises described herein for the uses and purposes as herein set forth and in strict accordance with all the provisions of the City of Waukesha zoning and health ordinances and all other ordinances of the City of Waukesha and State of Wisconsin applicable to said premises.

PERMIT EXPIRATION: This permit is effect for 24 months after approval or the date indicated on the permit per City of Waukesha Building Code Section 16.03(4). Approved plans for Commercial Buildings shall expire as set forth in Wis. Admin. Code SPS §361.36. Double fees shall be charged if work is started before a permit is issued. Work covered before inspection will be required to be totally exposed for inspection. Once notified that your permit has been approved for issuance, payment must be received within 25 working days. After this period, the project will be marked null & void and all submittals will be destroyed.

☐ **I HAVE READ AND UNDERSTAND THE TERMS STATED ABOVE.**

Print Name	Email Address	Signature	Date

Revised 9/9/2022

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Cautionary Statement to Property Owners

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 may occurs: (a) The owner may be held liable for any bodily injury or death of others or for any damage to the property of others that arises out of the work performed under the building permit 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 of damage to the property of others that arises from 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.

Signature below indicates receipt and acknowledgement of the contents of this document.

Homeowner Name: _____

Owners Signature: _____ Date: _____