Village of Trempealeau

Village of Trempealeau Permit Application

Applicant Information

Owner: _____
First *Last*

Address: _____

_____
City *State* *ZIP Code*

Home Phone: ( ) _____ Alternate Phone: ( ) _____

Permit Information

This Permit shall conform to the provisions of the Trempealeau Code of Zoning Ordinances. Complete applicable information.

Date of Application: _____

Location of Building: _____

Description of the Alteration/Addition/Accessory Structure: _____
_____
_____

Size of Present Building: _____
How many stories existing building: _____
How many stories proposed building: _____
Size of Lot: _____

Is building to be occupied as a residence, if yes how many families: _____

Cost of changes: _____

Architect or Engineer: _____ Contact Information: _____
General Contractor: _____ Contact Information: _____
Electrical Contractor: _____ Contact Information: _____
Plumbing Contractor: _____ Contact Information: _____

Authorization

The undersigned states that the foregoing information is true and accurate to the best of their knowledge; it is hereby agreed that for and in consideration of the issuance of a Permit that the foregoing work will be carried out as defined in this application; that all applicable ordinances or codes of the state, county, and village will be complied with in carrying out the proposed work stated in the application; and that work will not commence before a permit has been obtained. If any changes or deviations are made from the original application, a new permit or written request for a permit revision and subsequent approval is required. Failure to comply with the permit as issued will result in the revocation of the permit or other penalties. Property owners, builders, and contractors are responsible for code compliance and reasonable care in construction.

Signature of applicant: _____ Date: _____

The Zoning Administrator finds that at this time the planned construction is expected to or does conform to the above provisions and hereby authorizes this Permit.

Signature of Official: _____ Date: _____

OFFICE USE ONLY
PERMIT # _____ FEE CHARGED _____ PERMIT TAKEN BY _____