

Application For Plan Duplication

City of Madison
Neighborhood Preservation &
Inspection Division
215 Martin Luther King Jr. Blvd.
Madison, WI 53703
(608) 266 4551

Address for Plans being Requested:

No. Street

City State Zip Code

Name and Address of the Property Owner:

First Last Middle Initial

Address

City State Zip Code

Name and Address of Applicant:

First Last Middle Initial

Address

City State Zip Code

Phone Number

Type of Plans Requested

One or Two Family Home Commercial Building

- 1 New Building
- 2 Interior Alteration
- 3 Alteration
- 4 Addition
- 5 Addition and Alteration
- 6 Repair
- 7 HVAC
- 8 Plumbing
- 9 Other Specify _____

Plan Bin # _____ - _____

I, _____ certify that any information obtained from the inspection or copying of these plans will not be used for any unlawful or unfair competitive purpose; and that the information set forth in this application is true and correct. This certification is required by sec. 101.12 (5)(b) Wis stats.

Signature _____ Date _____

Witness _____ Date _____

Plan Search and Owner Notification Fee \$15.00

Total \$ _____

For Office Use Only

Fees Paid

\$100.00 Deposit Received Returned