



APPLICATION FOR BUILDING PLAN REVIEW ONE OR TWO UNIT DWELLING

City of Madison Building Inspection
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Madison, WI 53703
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STATE SEAL
(for office use only)

Submittal Date: _____

Project Address: _____

Type of Building: SF home Duplex (one parcel) Twin home (two units with property line between)

Project Type: New building Addition Alteration Revision to previously approved plan

Number of Stories: 1 story 2 story Other _____ Finished Basement?: Yes No

Scope of Work: e.g. - New home, single story heated addition, unheated enclosed porch addition, screen room addition, new deck, finish basement, kitchen remodel, convert attic to habitable space, convert two-unit to Single Family, etc.

Estimated Cost: (full project cost minus the cost of plumbing, heating, electric, carpet, and cabinetry)

\$ _____

Owner Information:

Name: _____
Phone number: _____
Email: _____

Contractor Information:

Company Name: _____
Phone number: _____
Email: _____
Dwelling Contractor Qualifier Number: _____
Dwelling Contractor Number: _____

Designer Information (optional):

Name: _____ Email: _____

Mechanical Contractors:

Square Footage of new or altered building area

Square Footage of lot

Plumbing Contractor:

Electrical Contractor:

HVAC Contractor:

Basement: _____
1st, 2nd, and 3rd floors: _____
Garage: _____
Open porches/decks: _____
Total Square feet: _____

Total Lot Area:

Total square footage of all buildings and paved areas except sidewalks:
