



City Of Madison

**Building Plan Approval Application**

Department of Planning & Economic & Community Development  
 Inspection Division  
 126 S. Hamilton St.  
 Madison WI 53703  
 P.O. Box 2984 (zip code 53701-2984)  
 (608) 266-4551 Fax (608) 266-6522

**Instructions:** Fill in all applicable data. Submittal of this plan approval Application form is required with each plan submittal, with a minimum of **two** sets of plans. **SUBMIT PLUMBING PLANS SEPARATELY, ACCOMPANIED BY AN APPLICATION FORM.**

1. Occupancy type		2. Project information		3. Type of submittal	
Check all that apply <input type="checkbox"/> A. Assembly <input type="checkbox"/> B. Business <input type="checkbox"/> E. Education <input type="checkbox"/> F. Factory <input type="checkbox"/> H. Hazardous <input type="checkbox"/> I. Institutional <input type="checkbox"/> M. Mercantile <input type="checkbox"/> R. Residential <input type="checkbox"/> S. Storage <input type="checkbox"/> U. Utility	Circle sub use	<b>Project Address</b>		<b>Project type</b>	<b>Review type</b>
	A1 A2 A3 A4 A5	<b>Tenant or occupant name</b>  Has a building code variance been applied for? Yes No  Variance approval number: _____		<input type="checkbox"/> New <input type="checkbox"/> Alteration level 1 2 3 <input type="checkbox"/> Addition <input type="checkbox"/> Repair  <input type="checkbox"/> Revision to previously approved plan <input type="checkbox"/> Capacity only	<input type="checkbox"/> Foundation only <input type="checkbox"/> Building <input type="checkbox"/> HVAC <input type="checkbox"/> Truss <input type="checkbox"/> Precast <input type="checkbox"/> Metal building <input type="checkbox"/> Antenna / Tower
	school daycare F1 F2 H1 H2 H3 H4 H5 I1 I2 I3 I4  R1 R2 R3 R4 S1 S2				
<b>Brief project description</b>					
<b>4. Project designer</b>		<b>5. HVAC designer</b>		<b>6. Building owner</b>	
Designer	Reg. #	Designer	Reg. #	Company name	
Design Firm		Design Firm		Name	
Address		Address		Address	
City/state/zip code		City/state/zip code		City/state/zip code	
Contact person		Contact person		Contact person	
Telephone Number ( )		Telephone Number ( )		Telephone Number ( )	
email		email		email	
<b>7. Class Of Construction</b>		<b>8. Building information</b>			
<input type="checkbox"/> IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB		Total stories of building above grade _____		<input type="checkbox"/> Complete Sprinkler <input type="checkbox"/> 13 <input type="checkbox"/> 13R <input type="checkbox"/> Partial Sprinkler explain:	
		Total floor area for each floor work is done on:		<input type="checkbox"/> Unlimited Area If areas are separated by fire barriers or firewalls give the reason for the separation.	
		Floor: _____ Area: _____ sq. ft.			
		Floor: _____ Area: _____ sq. ft.			
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		Floor: _____ Area: _____ sq. ft.			
<b>9. Building permit information</b>					
Building contractor (for building plans)			HVAC Contractor (for HVAC plans)		
<b>Estimated Cost:</b> For <b>alterations</b> do not include HVAC, plumbing, or electrical costs					
New/addition: (total) \$		Alteration: (no MEP) \$		New Parking Lot: \$	

