

MELSTROM INSPECTIONS, LLC

JOSHUA MELSTROM
 480-261-9014
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 GLENWOOD CITY, WI 54013
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General Commercial Building Permit Application

Building Site Address		Municipality
Owner's Name	Owners Daytime Phone	
Owner's Mailing Address		Owners Email
Applicant's Name (If Different than owner)	Applicant Daytime Phone	
Applicant's Mailing Address		Applicant's Email
Project Description:		
Project Square Footage		
Project Value: \$	***Project value includes all the trades(building, electrical, plumbing, HVAC, ect..) that is involved in the project. The total cost of the project minus the land.	

Plans are included with the application

Yes

No

Plans have been reviewed and approved by State

Yes

No

N/A

If Yes, please include the approval letter from the State with application.

****Complete the information below as it pertains to this project.**

General Contractor	Contact Name	Daytime Phone	
Mailing Address		Email	
HVAC Contractor	Contact Name	Daytime Phone	
Mailing Address		Email	
Plumbing Contractor	Contact Name	Daytime Phone	
Mailing Address		Email	
Master Plumber	Credential Number	Daytime Phone	

I understand that I am subject to all applicable codes, laws, statutes, and ordinances, or any additional contingencies as part of this permit; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state, municipality, building inspector, and/ or the inspectors authorized agent; certify that all the above information is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which the permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

SIGNATURE OF
 APPLICANT

DATE
