

Melstrom Inspections, LLC

Joshua Melstrom
 480-261-9014
 3074 96th Avenue
 Glenwood City, WI 54013
 jmelstrominspect@gmail.com

Garage/Shed Permit Application

Building Site Address		Town, Village, City
Owner's Name	Owners Daytime Phone	Parcel ID
Owner's Mailing Address		Owners Email
Applicant's Name (If Different than owner)	Applicant Daytime Phone	
Applicant's Mailing Address		Applicant's Email

Details about the Garage/Shed

Wide: _____ Length: _____ Height _____ Square Footage: _____

Footings:	Floor:	Walls/Ceiling:	Heat Source:	Plumbing	Electric
<input type="checkbox"/> Posts	<input type="checkbox"/> Concrete	<input type="checkbox"/> Insulated	<input type="checkbox"/> Forced Air	<input type="checkbox"/> Water	<input type="checkbox"/> Electric w/ new panel
<input type="checkbox"/> Footing/Foundation	<input type="checkbox"/> Other	<input type="checkbox"/> Non-Insulated	<input type="checkbox"/> In-floor Heat	<input type="checkbox"/> Sanitary Installed	<input type="checkbox"/> Electric w/ no new p
<input type="checkbox"/> Slab on Grade			<input type="checkbox"/> No Heat	<input type="checkbox"/> Drain to Daylight	<input type="checkbox"/> No Electric

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.
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Plans are included with the application **Yes** **No**

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

Dwelling Qualifier	WI License Number		
Dwelling/General Contractor	Contact Name	Daytime Phone	Dwelling Contractor License
Mailing Address		Email	
HVAC Contractor	Contact Name	Daytime Phone	WI License Number
Mailing Address		Email	
Plumbing Contractor	Contact Name	Daytime Phone	
Mailing Address		Email	
Master Plumber	WI License Number	Daytime Phone	
Electrical Contractor	Contact Name	Daytime Phone	WI License Number
Mailing Address		Email	
Master Electrician	Email	Daytime Phone	WI License Number

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 _____