

Village of Oostburg Permit Application



Application Date: _____

Type of Permit:

Building Permit Electrical Permit Plumbing Permit HVAC Permit

OWNER	PRIME CONTRACTOR
Name: _____	Name: _____
Address: _____	Address: _____
City, State, Zip: _____	City, State, Zip: _____
Phone: () _____	Phone: () _____
Email: _____	Fax: () _____
Address where work will be done if different than owner's address: _____	Email: _____
	License #: _____
	Contact Name: _____

Send Bill To: Owner Contractor

BUILDING PERMIT	ELECTRICAL PERMIT	PLUMBING / HVAC PERMIT
Work Consists of: _____ _____ _____	Work Consists of: _____ _____ _____	Work Consists of: _____ _____ _____
Estimated Cost of Work: \$ _____	Estimated Cost of Work: \$ _____	Estimated Cost of Work: \$ _____

FEES																																																			
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Notes, conditions, restrictions:

Application Approved: _____

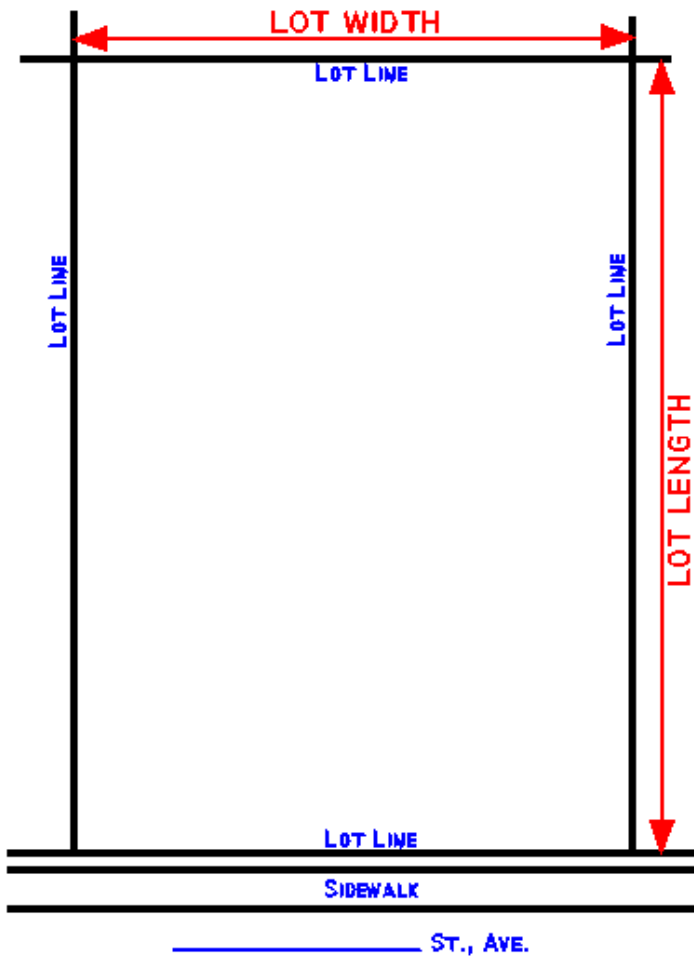
Application Denied: _____

(Date)

(Date)

Building Inspector

Zoning Chairman



Use the map to the left to draw the buildings on your lot, providing dimensions from the buildings to the lot lines. Letter each dimension and fill it in below on the corresponding letter.

Lot Width: _____

Lot Length: _____

A: _____

B: _____

C: _____

D: _____

E: _____

F: _____

G: _____

H: _____

I: _____

J: _____

Once the permit application is complete, return both pages to the Building Inspector's Office:

**Jeffrey Gabrielse, Building Inspector
 Village of Oostburg
 1140 Minnesota Avenue
 PO Box 700227
 Oostburg, WI 53070-0227**

Call Jeff at 920-946-4270 if you have any questions.

**Upon Approval of the permit application by the Building Inspector and Zoning Chairman,
 a Building Permit will be Issued**

For Office Use Only

Tax Key Number:

Zoning District:

Permit Printed:

Permit Billed:

Permit Number:

Invoice Number: