FOR OFFICIAL USE ONLY	Permit No
Approved by:	Tax Key No.
	Date Issued:
City of Hartford / 109 N. Main	Street, Hartford, WI 53027 / 262-673-8277
Residen	itial Building Permit
Please Print or Type	
Address of Work:	
Owner & Address:	
	E-Mail:
Building/Dwelling Contractor Certification #	Qualifier #:
	E-Mail:
Kind of Building: Wood Frame	Masonry Steel Other
PERMIT HOLDERS/APPLICANTS: The undersign plans and specifications, and located as shown on the in accordance with the description, plans, and specific other ordinances of the City and requirements of the St applies for a permit to occupy the premises for the use of the City zoning ordinance and all other ordinances to the premises. The undersigned agrees that the premises	need applies for a permit to do work described according to the filed attached plot plan. the undersigned agrees that the work will be done ations in compliance with the building code, zoning ordinance and all tate of Wisconsin, applicable to the premises. The undersigned further is and purposes as set forth in strict accordance with all the provisions of the City, Washington County and State of Wisconsin, applicable mises will not be occupied until ordinance has been approved by the all for all required inspections, allowing up to 48 hours for inspection Owner/Contractor Signature
	*
	ICIAL USE ONLY
Zoning Review Required?	Approved?
Permit Fee (Account Number 100.240.440000.44	(Please note: \$55.00 minimum)
Property Records: Maintenance Fee (100.135.44.	3900.44390):
Processing Fee (Account Number 100.125.46110	0.46112): \$15.00
SI	UBTOTAL:
Work Started Without Permit (100.240.440000.4	4250)
Total Fee:	

Copies: WHITE/Building Inspector YELLOW/Assessor HARD CARD/Owner (permbld)