

# TOWN OF LACROSSE APPLICATION

**BUILDING PERMIT** PERMIT # \_\_\_\_\_  
OR  
**MECHANICAL OR PLUMBING** PERMIT # \_\_\_\_\_  
OR  
**DEMOLITION** PERMIT # \_\_\_\_\_

— PERMITS EXPIRE 6 MONTHS FROM DATE OF ISSUANCE —  
THE PERMIT MAY BE EXTENDED IF APPLICATION IS MADE IN WRITING  
BEFORE PERMIT EXPIRES AND A PAYMENT OF A \$40 EXTENSION FEE.

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DATE OF APPLICATION: \_\_\_\_\_  
OWNER: \_\_\_\_\_  
LOCATION OF PROPERTY: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

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DESCRIPTION OF WORK: (CIRCLE)

**NEW**      **REMODEL**      **REPAIR**      **ADDITION**      **DEMOLISH**

USE OF BUILDING: HOME or BUSINESS: \_\_\_\_\_  
SIZE OF BUILDING: \_\_\_\_\_ sq feet    STORIES: \_\_\_\_\_    # OF ROOMS: \_\_\_\_\_    # OF FAMILIES: \_\_\_\_\_  
BASEMENT \_\_\_\_\_    FOUNDATION \_\_\_\_\_    ROOF COVERING \_\_\_\_\_    HEATING TYPE \_\_\_\_\_  
CHIMNEY \_\_\_\_\_    FIREPLACE \_\_\_\_\_    EXTERIOR FINISH \_\_\_\_\_    INTERIOR FINISH \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE INCLUDE A COPY OF A BLUEPRINT OF PROJECT & MAP OF LOCATION ON PROPERTY**

ESTIMATE COST: \$ \_\_\_\_\_  
CONTRACTOR: \_\_\_\_\_ LICENSE # \_\_\_\_\_

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OFFICE USE ONLY

PERMIT FEE: \$ \_\_\_\_\_ . \_\_\_\_\_      DATE OF APPROVAL: \_\_\_\_\_  
STATE FEE: \$      6    .    50      INSPECTOR: \_\_\_\_\_  
TOTAL FEES: \$ \_\_\_\_\_ . \_\_\_\_\_      DATE OF INSPECTION: \_\_\_\_\_  
PAID : CASH or CHECK # \_\_\_\_\_      INSPECTOR: \_\_\_\_\_