



City of Kenosha  
Department of Neighborhood Services and Inspections  
625 52nd Street, Room 100, Kenosha, WI 53140  
Phone: 262.653.4263, Fax: 262.653.4254

**PERMIT APPLICATION PACKET  
FOR  
COMMERCIAL ADDITION**

The following items must be completed and submitted as a packet:

- \_\_\_\_\_ Commercial Addition permit application
- \_\_\_\_\_ Occupancy Commercial permit application (for building shell)
- \_\_\_\_\_ Erosion Control Commercial permit application with:
  - \_\_\_\_\_ Notice of Intent (NOI) from the Department of Commerce (one or more acre)
  - \_\_\_\_\_ Two (2) sets of erosion control plans (civil drawings)
- \_\_\_\_\_ Business Occupancy permit application
- \_\_\_\_\_ Two (2) certified surveys
- \_\_\_\_\_ Two (2) sets of blueprints (State-approved, if applicable; i.e., if the existing building plus the addition are over 50,000 cubic feet)
  - \_\_\_\_\_ One (1) additional blueprint (size 8 1/2" x 11" or 11" x 17")
- \_\_\_\_\_ One (1) copy of State approval letter (if applicable)
- \_\_\_\_\_ Cautionary Statement (only required if the owner is listed as the contractor)

**For Office Use Only:**

Zoning Review: \_\_\_\_\_

Scanned: \_\_\_\_\_

City Development:  Yes  No

Date Forwarded to City Development: \_\_\_\_\_

**Note:** You will be notified when your permits are ready; please do not submit payment with permit applications.



City of Kenosha  
 Department of Neighborhood Services and Inspections  
 625 52nd Street, Room 100, Kenosha, WI 53140  
 Phone: 262.653.4263, Fax: 262.653.4254

Office Use Only:

**APPLICATION FOR  
 COMMERCIAL ADDITION**

This document must be legible or will be returned.

Project Address \_\_\_\_\_

Project Name \_\_\_\_\_

\*Contractor \_\_\_\_\_

Mailing Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

Contractor e-mail \_\_\_\_\_

**\*Note to Contractor:** Please see attached "State Licensing Requirements."

Estimated  
 Cost (structural only) \_\_\_\_\_

Business Name \_\_\_\_\_

Area \_\_\_\_\_

Construction Class \_\_\_\_\_

Height \_\_\_\_\_

Sprinklered : Yes \_\_\_\_\_ No \_\_\_\_\_

**For Office Use Only :** Plan File # \_\_\_\_\_ Zoning \_\_\_\_\_ Review Chapter \_\_\_\_\_

*I agree to comply with all applicable codes, statutes, and ordinances, and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and, certify that all the above information is accurate. If I am an owner applying for an erosion control or construction permit, I have read and signed the attached cautionary statement. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.*

Applicant Signature: \_\_\_\_\_

DESCRIPTION	PRICE PER UNIT	QTY	PLAN REVIEW		
			SQUARE FEET	FEE	QTY
NEW BUILDINGS	\$ .32 Per Sq. Ft.	_____	0-1,000	\$ 150.00	_____
MINIMUM FEE	\$ 75.00 Ea.	_____	1,001-2,500	\$ 250.00	_____
FIRE PREVENTION			2,501-5,000	\$ 350.00	_____
BUREAU INSPECTION	\$ 60.00 Ea.	_____	5,001-10,000	\$ 450.00	_____
			10,001-20,000	\$ 550.00	_____
			20,001-30,000	\$ 650.00	_____
			30,001-40,000	\$ 750.00	_____
			40,001-50,000	\$ 850.00	_____
			50,001-75,000	\$ 950.00	_____
			75,001-100,000	\$ 1,050.00	_____
			100,001-200,000	\$ 1,150.00	_____
			Over 200,000	\$ 1,500.00	_____



City of Kenosha  
Department of Neighborhood Services and Inspections  
625 52nd Street, Room 100, Kenosha, WI 53140  
Phone: 262.653.4263, Fax: 262.653.4254

## **State Licensing Requirements for Contractors:**

### **Note to Contractors of One- or Two-family Dwellings:**

Any contractor that performs work on a one- or two-family dwelling must possess the following two licenses:

1) Dwelling Contractor Number: \_\_\_\_\_

Signature of Designee: \_\_\_\_\_

Print Name: \_\_\_\_\_

2) Dwelling Qualifier Number: \_\_\_\_\_

Dwelling Qualifier Licensee Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

### **Note to Contractors of Multi-family Dwellings or Commercial Projects:**

Any contractor that performs work on a multi-family dwelling or commercial property must possess the above two licenses **OR**:

Building Contractor Registration (BCR) Number: \_\_\_\_\_

Signature of Designee: \_\_\_\_\_

### **Note to Property Owners:**

If the owner of the property is listed as the contractor, a license is not required; however, the attached "Cautionary Statement" must be signed by the property owner.

**CITY OF KENOSHA**  
**Department of Neighborhood Services and Inspections**

**CAUTIONARY STATEMENT TO OWNERS OBTAINING BUILDING PERMITS**

*101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that:*

If the owner hires a contractor to perform work under the building permit, and the contractor is not bonded or insured as required under S.101.654(2)(a), the following consequences might occur:

- a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.
- b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one- and two-family dwelling code or an ordinance enacted under Sub.(1)(a) because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**ADDITIONAL RESPONSIBILITIES FOR OWNERS OF PROJECTS DISTURBING ONE OR MORE ACRE OF SOIL**

I understand that this project is subject to Ch. NR 151 regarding additional erosion control and stormwater management and will comply with those standards.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PERMIT ISSUED SUBJECT TO THE FOLLOWING**

- 1. Work shall be started within sixty (60) days of the issue date, or permit becomes **expired**.
- 2. Permit expires **six months to one year** after the issue date. See Department for details.
- 3. Fee for permit issued after work has commenced will be **two (2) times** the normal rate.
- 4. The applicant shall be responsible for obtaining the permit for the proper address. A permit is not transferable to another address.
- 5. Permits issued for razing buildings shall become null and void if work is not commenced and completed within thirty (30) days, or as stated.
- 6. All plumbing, electrical, and HVAC work shall be done by licensed contractors under proper permits.
- 7. Remodeled/renovated basement areas are not to be used as sleeping areas; unless in accordance with residential one- and two-family alteration and remodeling standards.
- 8. The applicant assumes full responsibility for proper location of property lines and the proper building/structure location from property lines.



City of Kenosha  
 Department of Neighborhood Services and Inspections  
 625 52nd Street, Room 100, Kenosha, WI 53140  
 Phone: 262.653.4263, Fax: 262.653.4254

**OCCUPANCY CHECKLIST  
 FOR COMMERCIAL, INSTITUTIONAL, MANUFACTURING, AND MULTI-FAMILY  
 NEW CONSTRUCTION AND ADDITIONS**

**Note:** This form must be presented to the building inspector at the time of final inspection.

*The purpose of the occupancy checklist is to insure that all work and conditions necessary to obtain a Certificate of Occupancy (CO) have been completed. Upon issuance of the permit, this occupancy checklist shall be affixed to the interior of the front door of the building. Prior to the scheduling of the final inspection with the building inspector, the box adjacent to each listed code requirement must be checked, thereby signifying it has been completed; and, the checklist must be signed at the bottom. If these procedures are not followed, the final inspection will not be conducted; and, a reinspection fee will be assessed.*

---

*Address of Property*

**Required Department Approvals:**

- City Development approval received
- Assessor Office approval received
- Fire Prevention Bureau approval received
- Kenosha Water Utility approval received
- Public Works approval received
- Parks approval received
- Zoning approval received
- Storm Water Utility approval received

**Site Conditions:**

- Soil stockpiles removed from site
- Site stabilized with seed/sod or erosion control matting
- Site graded to meet approved grading plan
- Temporary erosion control measures removed

**Required Construction Approvals:**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Plumbing signed off on inspection card</li> <li><input type="checkbox"/> Erosion Control signed off on inspection card</li> <li><input type="checkbox"/> Structural Compliance Statement submitted</li> <li><input type="checkbox"/> HVAC Compliance Statement submitted</li> <li><input type="checkbox"/> Moisture control, weep holes provided, sealants and caulking</li> <li><input type="checkbox"/> Draftstopping/Firestopping</li> <li><input type="checkbox"/> Floor/wall/ceiling finishes</li> <li><input type="checkbox"/> Exit door installation, width, swing, hardware, landings</li> <li><input type="checkbox"/> Smoke and heat vents</li> <li><input type="checkbox"/> Stair tread, riser, handrail-handgrip dimensions, intermediate rails and openings</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Electric signed off on inspection card</li> <li><input type="checkbox"/> Health Department signed off on inspection card (if applicable)</li> <li><input type="checkbox"/> HVAC air balance test and report submitted</li> <li><input type="checkbox"/> Penetrations in rated assemblies</li> <li><input type="checkbox"/> Rated fixtures in rated ceiling/roof assemblies</li> <li><input type="checkbox"/> Damper access panels</li> <li><input type="checkbox"/> Safety glazing and guarding on windows and doors</li> <li><input type="checkbox"/> Exit lights</li> <li><input type="checkbox"/> Foam plastic protection</li> <li><input type="checkbox"/> ADA parking spaces/ramps/signage</li> </ul> |
|---|--|

*I verify that, to the best of my knowledge, all of the above items have been installed and completed in compliance with all applicable codes and ordinances as required by the City of Kenosha. I also understand that if this checklist is not posted at the time of inspection, the inspection will not be conducted; and, a reinspection fee shall be assessed.*

---

**Contractor/Owner**

**Date**