



VILLAGE OF JACKSON

"Small Town Living / World Class Technology"

ROOFING/SIDING PERMIT

The following information is necessary to obtain a building permit for roofing and/or siding, soffit & fascia. **A General Building Project Application must be complete with all the applicable required information.** Failure to provide all information & two (2) sets of plans or scope of work will delay the permit issuance process. The Building Inspector may request additional information as required.

Processing of permits is usually five (5) working days, but at peak construction times processing may take longer.

1.) Scope of Work. Two copies of a scope of work outlining all construction work to be performed shall be submitted along with the permit application. The scope of work shall outline the type of existing roofing or siding material to be removed, the type of replacement material(s), number of existing layers of roofing material, and description of construction procedure. If windows are also being installed/replaced, you must include that information in the scope of work. A DETAILED contractor's bid proposal can be substituted for the scope of work.

2.) Water Department Notification. The permit applicant **SHALL** notify the water utility department **PRIOR** to starting the construction project. The outside water meter transponder shall be removed by the Village of Jackson Water Department before removing or installing siding on the structure.

The Water Department can be notified by calling 262-677-0707 ext. 13. (A minimum of 24-hour notice is required.)

If the water meter register is damaged or missing, a fee of \$125.00 will be assessed upon final inspection.

3.) Dwelling Contractor Financial Responsibility. No person may obtain a building permit for a one or two-family dwelling unless the person holds a certification issued by the department as a dwelling contractor financial responsibility certification or a dwelling contractor financial responsibility-resisted certification, except as provided under Section 101.654(1)(b). Wis. Stats. Section 101.654(1)(b), Wis. Stats., exempts an owner of a dwelling who resides or will reside in the dwelling for a minimum of six (6) months and who applies for a building permit to perform the work on the dwelling from obtaining a dwelling contractor financial responsibility certification.

4.) All construction debris is the responsibility of the property owner or contractor. Dumpsters may **NOT** be placed on public roads or within public right-of-way areas, utility easements, drainage ditches, etc. without PRIOR Village Approval. Contact the Jackson Police Department for street privileges.

5.) The total cost of construction shall be indicated on the building permit application.



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GENERAL PROJECT APPLICATION

APPLICATION DATE _____, 20____ PERMIT # _____ - _____

PROJECT ADDRESS _____ Unit #: _____ Jackson, WI

OWNER INFORMATION

Name(s) _____

Phone (____) _____ - _____ Cell/Home Email _____

Mailing Address _____

City _____ State _____ Zip _____

CONTRACTOR INFORMATION (If owner put "SELF")

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Primary Contact _____ Office Phone (____) _____ - _____

Mobile Phone (____) _____ - _____ Email _____

*WI Contractor Lic. #: _____, Exp: _____ *WI Qualifier Lic. #: _____, Exp: _____

**License Information is required for contractors wanting to obtain a permit for work on a 1 or 2 Family Dwelling ONLY*

****SUBMIT 2 sets of plans for residential and 4 sets of plans for commercial****

PROJECT INFORMATION

Project Description _____

Size of Building (or remodeled area) _____

TOTAL Cost of Project _____

Cost of Building, HVAC and Labor **ONLY** _____

Do NOT include the cost of plumbing, electrical, landscaping, etc.

By signing below, applicant agrees to comply with the applicable requirements of Village of Jackson Code of Ordinances and to obey any and all lawful orders of the Building Inspector and all state laws regarding the construction, alteration, repair, removal and safety of buildings and other structures.

Applicant Signature: _____ Date: _____

***** FOR OFFICE USE ONLY *****

Permit Fee: \$ _____ Date: _____ Receipt #: _____ CH / CC / CASH

Mailing Address
P.O. Box 637

W194 N16660 Eagle Drive
Jackson, Wisconsin 53037

Phone: (262) 677-9696
Fax: (262) 677-8770