



New Home

paperwork checklist

- WI Uniform Building Application (ESLA)

- Application for Zoning (\$400)

- Residential Occupancy Bond (\$2,000)

- Road, Ditch, Culvert Bond (\$2,500)

- Culvert/911 Sign (\$240)

- Sanitary Permit (from Waukesha County)

- Soil Borings

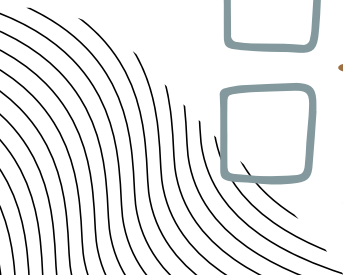
- Survey (4 copies)

- Grading Plan (2 copies)

- House Plans (4 copies)

- Form A

ALL ITEMS SHOULD BE SEPARATE CHECKS (made out to Town of Genesee)



Dept of Safety & Professional Services Industry Services Division Wisconsin Stats. 101.63, 101.73	<h2 style="margin:0;">Wisconsin Uniform Building Permit Application</h2> <p style="margin:0; font-size: small;">Instructions on back of second ply. The information you provide may be used by other government agency programs [(Privacy Law, s. 15.04 (1)(m))]</p>	Application No. Parcel No.
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PERMIT REQUESTED Constr. HVAC Electric Plumbing Erosion Control Other:

Owner's Name	Mailing Address	Tel.
Contractor Name & Type	Lic/Cert# Exp Date Mailing Address	Telephone & Email
Dwelling Contractor (Constr.)		
Dwelling Contr. Qualifier (The Dwelling Contr. Qualifier shall be an owner, CEO, COB or employee of the Dwelling Contr.)		
HVAC		
Electrical Contractor		
Electrical Master Electrician		
Plumbing		

PROJECT LOCATION Lot area _____ Sq.ft. One acre or more of soil will be disturbed Town Village City of _____ _____ 1/4, _____ 1/4, of Section _____, T _____ N, R _____ E/W

Building Address _____ County _____ Subdivision Name _____ Lot No. _____ Block No. _____

Zoning District(s) _____ Zoning Permit No. _____ **Setbacks:** Front _____ ft. Rear _____ ft. Left _____ ft. Right _____ ft.

1. PROJECT		3. OCCUPANCY		6. ELECTRIC		9. HVAC EQUIP.		12. ENERGY SOURCE					
<input type="checkbox"/> New	<input type="checkbox"/> Repair	<input type="checkbox"/> Single Family	Entrance Panel Amps: _____	<input type="checkbox"/> Furnace	Fuel Nat Gas LP Oil Elec Solid Solar Geo								
<input type="checkbox"/> Alteration	<input type="checkbox"/> Raze	<input type="checkbox"/> Two Family		<input type="checkbox"/> Undergound	<input type="checkbox"/> Radiant Basebd	Space Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Addition	<input type="checkbox"/> Move	<input type="checkbox"/> Garage	<input type="checkbox"/> Overhead	<input type="checkbox"/> Heat Pump	Water Htg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Other:		<input type="checkbox"/> Other:	7. WALLS	<input type="checkbox"/> Boiler									
2. AREA INVOLVED (sq ft)		4. CONST. TYPE		<input type="checkbox"/> Wood Frame	<input type="checkbox"/> Central AC		13. HEAT LOSS						
	Unit 1	Unit 2	Total	<input type="checkbox"/> Site-Built	<input type="checkbox"/> Steel	<input type="checkbox"/> Fireplace	_____ BTU/HR Total Calculated						
Unfin.				<input type="checkbox"/> Mfd. per WI UDC	<input type="checkbox"/> ICF	<input type="checkbox"/> Other:	Envelope and Infiltration Losses (available from "Total Building Heating Load" on Rescheck report)						
Bsmt				<input type="checkbox"/> Mfd. per US HUD	<input type="checkbox"/> Timber/Pole	10. SEWER							
Living Area				5. STORIES	<input type="checkbox"/> Other:	<input type="checkbox"/> Municipal							
Garage				<input type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> Sanitary Permit# _____							
Deck/Porch				<input type="checkbox"/> 2-Story	<input type="checkbox"/> Permanent	11. WATER							
Totals				<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Municipal							
				<input type="checkbox"/> Basement		<input type="checkbox"/> On-Site Well	\$ _____						

I understand that I am subject to all applicable codes, laws, statutes and ordinances, including those described on the reverse side of the last ply of this form; am subject to any conditions of this permit; understand that the issuance of this permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. If one acre or more of soil will be disturbed, I understand that this project is subject to ch. NR 151 regarding additional erosion control and stormwater management and the owner shall sign the statement on the back of the permit if not signing below. 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.

I vouch that I am or will be an owner occupant of this dwelling for which I am applying for an erosion control or construction permit without a Dwelling Contractor Certification and have read the cautionary statement regarding contractor responsibility on the second page of this form.

APPLICANT (Print): _____ **Sign:** _____ **DATE** _____

APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. See attached for conditions of approval.

ISSUING JURISDICTION	<input type="checkbox"/> Town of _____ <input type="checkbox"/> Village of _____ <input type="checkbox"/> City of _____	<input type="checkbox"/> County of _____ <input type="checkbox"/> State _____	State-Contracted Inspection Agency#: _____	Municipality Number of Dwelling Location _____
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FEES:	PERMIT(S) ISSUED	WIS PERMIT SEAL #	PERMIT ISSUED BY:
Plan Review \$ _____	<input type="checkbox"/> Construction		Name _____
Inspection \$ _____	<input type="checkbox"/> HVAC		Date _____ Tel. _____
Wis. Permit Seal \$ _____	<input type="checkbox"/> Electrical		Cert No. _____
Other \$ _____	<input type="checkbox"/> Plumbing		Email: _____
Total \$ _____	<input type="checkbox"/> Erosion Control		

INSTRUCTIONS

The owner, builder or agents shall complete the application form down through the Signature of Applicant block and submit it and building plans and specifications to the enforcing jurisdiction, which is usually your municipality or county. Permit application data is used for statewide statistical gathering on new one- and two-family dwellings, as well as for local code administration. **Please type or use ink and press firmly with multi-ply form.**

PERMIT REQUESTED

- Check off type of Permit Requested, such as structural, HVAC, Electrical or Plumbing.
- Fill in owner's current Mailing Address and Telephone Number.
- If the project will disturb one acre or more of soil, the project is subject to the additional erosion control and stormwater provisions of ch. NR 151 of the WI Administrative Code. Checking this box will satisfy the related notification requirements of ch. NR 216.
- Fill in Contractor and Contractor Qualifier Information. Per s. 101.654 (1) WI Stats., an individual taking out an erosion control or construction permit shall enter his or her dwelling contractor certificate number, and name and certificate number of the dwelling contractor qualifier employed by the contractor, unless they reside or will reside in the dwelling. Per s. 101.63 (7) Wis. Stats., the master plumber name and license number must be entered before issuing a plumbing permit.

PROJECT LOCATION

- Fill in Building Address (number and street or sufficient information so that the building inspector can locate the site).
- Local zoning, land use and flood plain requirements must be satisfied before a building permit can be issued. County approval may be necessary.
- Fill in Zoning District, lot area and required building setbacks.

PROJECT DATA - Fill in all numbered project data blocks (1-14) with the required information. All data blocks must be filled in, including the following:

2. Area (involved in project):
 - Basements - include unfinished area only
 - Living area - include any finished area including finished areas in basements
 - Two-family dwellings - include separate and total combined areas
3. Occupancy - Check only "Single-Family" or "Two-Family" if that is what is being worked on. In other words, do not check either of these two blocks if only a new detached garage is being built, even if it serves a one or two family dwelling. Instead, check "Garage" and number of stalls. If the project is a community based residential facility serving 3 to 8 residents, it is considered a single-family dwelling.
9. HVAC Equipment - Check only the major source of heat, plus central air conditioning if present. Only check "Radiant Baseboard" if there is no central source of heat.
10. Sewage - Indicate if the dwelling will be served by municipal sewer or privately owned treatment system. If a private system is used, include the Sanitary Permit number. Note: A building permit cannot be issued for a new dwelling that utilizes a privately owned wastewater treatment system until a sanitary permit has been issued. This applies to any new or existing private onsite wastewater treatment system that will be used by the dwelling.
13. Heat Loss - Provide heat loss summation data (BTUs/HR) derived from the ResCheck report or the "Heating System Sizing Summary Calculator" available on the Division's website: <http://dsps.wi.gov/Programs/Industry-Services/Industry-Services-Programs/One-and-Two-Family-UDC>.
14. Estimated Cost - Include the total cost of construction, including materials and market rate labor, but not the cost of land or landscaping.

SIGNATURE - The owner or the contractor's authorized agent shall sign and date this application form. If you do not possess the Dwelling Contractor certification, then you will need to check the owner-occupancy statement for any erosion control or construction permits.

CONDITIONS OF APPROVAL - The authority having jurisdiction uses this section to state any conditions that must be complied with pursuant to issuing the building permit.

ISSUING JURISDICTION: This must be completed by the authority having jurisdiction.

- Check off Jurisdiction Status, such as town, village, city, county or state and fill in Municipality Name
- Fill in State Inspection Agency number only if working under state inspection jurisdiction.
- Fill in Municipality Number of Dwelling Location
- Check off type of Permit Issued, such as construction, HVAC, electrical or plumbing.
- Fill in Wisconsin Uniform Permit Seal Number, if project is a new one- or two-family dwelling.
- Fill in Name and Inspector Certification Number of person reviewing building plans and date building permit issued.

(Part of Ply 4 for Applicants)

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.

Cautionary Statement to Contractors for Projects Involving Building Built Before 1978

If this project is in a dwelling or child-occupied facility, built before 1978, and disturbs 6 sq. ft. or more of paint per room, 20 sq. ft. or more of exterior paint, or involves windows, then the requirements of ch. DHS 163 requiring Lead-Safe Renovation Training and Certification apply. Call (608)261-6876 or go to the Wisconsin Department of Health Services' lead homepage for details of how to be in compliance.

Wetlands Notice to Permit Applicants

You are responsible for complying with state and federal laws concerning the construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the Department of Natural Resources wetlands identification web page or contact a Department of Natural Resources service center.

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 standards, and will comply with those standards.

Owner's Signature: _____ Date: _____

Zoning Permit

Zoning Permits are required for most building projects in the Town of Genesee. To discuss the application process with the Town Planner contact-

Genesee Planner

Office hours Mondays 9am to 3pm

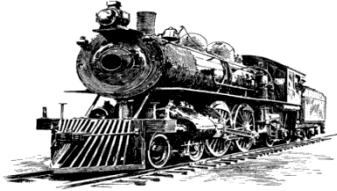
Phone- (262)968-3656

THE FOLLOWING TO BE SUBMITTED WITH THE ZONING APPLICATION

- Zoning Code Permit Application
- Three (3) copies of an accurate site plan or plat of survey(preferred), drawn to scale showing the following
 1. Location and dimensions of lot
 2. Location and dimensions of all existing/proposed buildings on lot and those within 50 feet of lot
 3. Location and centerline of all abutting streets
 4. High water line of any water body which lot abuts
 5. Location of existing/proposed wells and septic systems on lot and within 50' of lot
 6. Floor elevation of proposed new buildings
 7. Location of percolation tests and soil borings for new buildings
- Soil tests (New House Only)
- Three (3) sets of building plans
- A grading plan, for all new homes and maybe required for additions
- Approval of the septic system by the Environmental Health Division is required prior to issuance of the Zoning Permit. Preliminary Site Evaluation forms are available at the Town Hall or go to Waukesha County Environmental Health Division link (Check payable to WAUKESHA COUNTY)
- Applicable fee per fee schedule

Construction must start within 6 months and be completed within 18 months of the date of issuance of Zoning Permit.

If Plan Commission approval is required paperwork must be submitted the first Monday of the month to be on that month's agenda.



Town of Genesee
 S43 W31391 Highway 83
 P.O. Box 242
 Genesee Depot, WI 53127
 Tel: (262) 968-3656 Fax: (262) 968-3809

APPLICATION FOR A ZONING PERMIT

TAX KEY NO.: GNT

ZONING DISTRICT: _____

APPLICANT NAME, MAILING ADDRESS & DATE:

PROPERTY OWNER NAME, MAILING ADDRESS & DATE:

Printed Name

Mailing Address *City* *State* *Zip*

Phone *Fax* *Email*

Printed Name

Mailing Address *City* *State* *Zip*

Phone *Fax* *Email*

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: _____

DESCRIBE IN DETAIL THE PROPOSED WORK TO BE COMPLETED:

EXISTING STRUCTURE(S)

Principal Structure:

Width _____ Depth _____ Height _____
 1 Story _____ 2 Story _____ Split Level _____
 No. of Bedrooms _____ No. of Bathrooms _____
 Floor Area: 1st Floor _____ 2nd Floor _____
 Garage _____ Basement _____

Accessory Structure(s):

List type of structure(s) and size: _____

Total sq. ft. s (don't include basement) _____

Size of Lot: Average Width _____ Average Depth _____ Total Square Footage _____

PROPOSED STRUCTURE(S)

Principal Structure:

Width _____ Depth _____ Height _____
 1 Story _____ 2 Story _____ Split Level _____
 No. of Bedrooms _____ No. of Bathrooms _____
 Floor Area: 1st Floor _____ 2nd Floor _____
 Garage _____ Basement _____

Accessory Structure(s):

List type of structure(s) and size: _____

Total sq. ft. s (don't include basement) _____

Three (3) COPIES OF AN ACCURATE SITE PLAN OR PLAT OF SURVEY (preferred), DRAWN TO SCALE, MUST BE SUBMITTED WITH THIS APPLICATION. The map should show (1) location and dimensions of lot, (2) location and dimensions of all existing/proposed buildings on lot and those within 50 feet of lot, (3) location and centerline of all abutting streets, (4) high water line of any water body which lot abuts, (5) location of existing/proposed wells and septic systems on lot and within 50' of lot, (6) floor elevation of proposed new buildings, (7) location of percolation tests and soil borings for new buildings. **SOIL TESTS, TWO SETS OF BUILDING PLANS AND A GRADING PLAN MAY ALSO BE REQUIRED.** APPROVAL OF THE SEPTIC SYSTEM BY THE ENVIRONMENTAL HEALTH DIVISION IS REQUIRED PRIOR TO ISSUANCE OF THE ZONING PERMIT. AN INCOMPLETE APPLICATION FORM OR MISSING INFORMATION WILL CAUSE DELAY IN THE ISSUANCE OF THE ZONING PERMIT, AND THE APPLICATION MAY BE RETURNED FOR ADDITIONAL INFORMATION. CONSTRUCTION MUST START WITHIN 6 MONTHS AND BE COMPLETED WITHIN 18 MONTHS OF THE DATE OF ISSUANCE OF THE ZONING PERMIT.

Both of the undersigned state that the foregoing information is true and accurate to the best of his/her knowledge; it is hereby agreed that for and in consideration of the issuance of a zoning permit that the foregoing work will be carried out as defined in this application; that all applicable ordinances or codes of the state, county, and town will be complied with in carrying out the proposed work stated in the application; and that work will not commence before a building permit has been obtained from the town building inspector. If any changes or deviations are made from the original application, a new permit is required. Failure to comply with the permit as issued will result in the revocation of the permit or other penalties.

Signature of Owner _____ Date _____

Signature of Agent _____ Date _____

Application (approved) (denied) by Zoning Administrator _____ Date _____

Conditions for approval or reasons for denial _____

Town Use Only

Fee Paid _____ Receipt No. _____ PSE Approved _____ BOA No. _____ PO No. _____

ZP No. _____ CU No _____ File Copy _____ BI Copy _____ Assessor Copy _____ Owner Copy _____ Agent Copy _____

Residential Occupancy Cash Bond - \$2,000

Tax Key No. _____ Date _____

Site/Property Address _____

Legal Description _____

Property Owner's Name _____

Owner's current Address _____ City _____ State/Zip _____

Phone _____ Mobile _____ Fax _____ E-mail _____

Builder's Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail Address _____

Forfeiture of financial guarantee.

The financial guarantee required by article 319-4 of the Town of Genesee Code of Ordinances shall be forfeited to the Town of Genesee upon motion duly adopted by the Town Board, upon the Town of Genesee Building Inspector finding any of the following conditions to exist on the property at the time that the work is required to be completed:

1. There are outstanding fees, costs, or assessments due and owing to the Town of Genesee.
2. A building permit was required for new construction and the building was occupied prior to the issuance of an occupancy permit.
3. The construction on the property has resulted in the ponding of water or a drainage condition which adversely affects neighboring lands or has given rise to related stormwater drainage concerns which have not been adequately addressed.

Return of financial guarantee.

Any cash bond provided to the Town pursuant to the above, less any amount forfeited, shall be returned to the person, corporation or organization that provided the cash bond upon a determination being made by the Town Building Inspector that all of the issues identified above have been properly addressed and an occupancy permit, if applicable, has been issued.

Note: It is the Applicants responsibility to schedule an inspection when ready.

Please print clearly. Illegible and incomplete forms will not be accepted. Please remit payment with this application.

Applicant - Signature _____ Print _____ Date _____

Violations discovered during a requested Occupancy Permit inspection may not disqualify the unit from occupancy consideration but will result in a Notice of Violation being issued to the owner and further follow-up to ensure that the deficiencies have been corrected.

Prior to application submission all utilities shall be on and in working order, all required smoke detection shall be installed and in working order. The inspection will be held to the standards of the Uniform Dwelling Code as adopted by the Town of Genesee.

Town Use Only-

Deposit Paid \$ _____ Cash _____ Check No. _____ From _____ Date: _____

Amount Deposit Returned \$ _____ Check No. _____ Date _____

Refund returned to _____

Road, Ditch, Culvert & Driveway Cash Bond - \$2,500

Tax Key No. _____ Date _____

Site/Property Address _____

Legal Description _____

Property Owner's Name _____

Owner's Current Address _____ City _____

State _____ Zip _____ E-mail Address _____

Phone _____ Mobile _____ Fax _____

Forfeiture of financial guarantee.

The financial guarantee required by article 319-4 of the Town of Genesee Code of Ordinances shall be forfeited to the Town of Genesee upon motion duly adopted by the Town Board, upon the Town of Genesee Building Inspector finding any of the following conditions to exist on the property at the time that the work is required to be completed:

1. There are outstanding fees, costs, or assessments due and owing to the Town of Genesee.
2. Damage has been done to Town roads or ditches during the course of construction and said damage has not been repaired in a satisfactory manner.
3. The construction included work for which a culvert should have been installed in accordance with Town of Genesee ordinances but the culvert was not installed, or was installed but not in compliance with the requirements of the ordinance.
4. The construction has disturbed the previously existing topography and the disturbed areas have not been stabilized or do not have established vegetation or landscaping.

Return of financial guarantee.

Any cash bond provided to the Town pursuant to the above, less any amount forfeited, shall be returned to the person, corporation or organization that provided the cash bond upon a determination being made by the Town Public Works Superintendent that all of the issues identified above have been properly addressed.

Please print clearly. Illegible and incomplete forms will not be accepted. Please remit payment with this application.

Applicant Name: _____
Signature _____ Print _____

Date: _____

Town Use Only –

Deposit Paid \$ _____ Cash _____ Check No. _____ Check From _____

Date Deposit Received _____

Amount of Deposit Returned \$ _____ Check No. _____ Date _____

Refund Returned To _____

2022 Road, ditch, driveway and culvert

TOWN OF GENESEE
S43W31391 HIGHWAY 83; PO Box 242
GENESEE DEPOT, WI 53127
262-968-3656

DRIVEWAY REQUEST and/or HOUSE NUMBER SIGN PERMIT APPLICATION

All new residents are required to complete a driveway application unless on a county or state highway. By Town Ordinance, all parcels with improvement require a house number sign.

Application Fee Culvert - \$ 125.00 House number sign fee - \$ 115.00 (includes sign, post, install)

General Information

Owner _____ Current Address _____

City _____ State/Zip _____ Phone _____

Lot# _____ Subdivision _____

Tax Key # _____ Address of installation _____

Culvert Size: Width/diameter _____ Length 22' to 30' plus aprons ***ASPHALT APPROACH ONLY**

Amount paid \$ _____ Cash _____ Check No. _____ Check from _____

Culvert information –

Culvert must be installed before a building permit will be issued; culvert must be inspected as it's being installed. For culvert inspection call Public Works at 262-933-3810

THIS PERMIT IS SUBJECT TO THE CONDITION THAT THE WORK SHALL BE CONSTRUCTED SUBJECT TO ALL RULES AND REGULATIONS AS MAY BE PRESCRIBED BY THE TOWN OF GENESEE. ALL WORK MUST BE PERFORMED AND COMPLETED TO THE TOWN'S SATISFACTION.

_____ Date _____
Owner/Installer

CULVERT AT THE ABOVE LOCATION INSTALLED TO PROPERTY SPECIFICATIONS

_____ Date _____
Public Works Superintendent 262-933-3810

House Number Information

All address signs will be installed by the Town. Please note there will be a \$65.00 fee to replace a sign. The fee will be paid prior to installation.

.....
Town Use –
Sign ordered on _____ Received on _____ Installed on _____
Added to address book _____ Property address to County _____ Flyer/garbage _____
WisVote _____ Mailing address to county after receive occupancy _____ Sent letter to post office _____

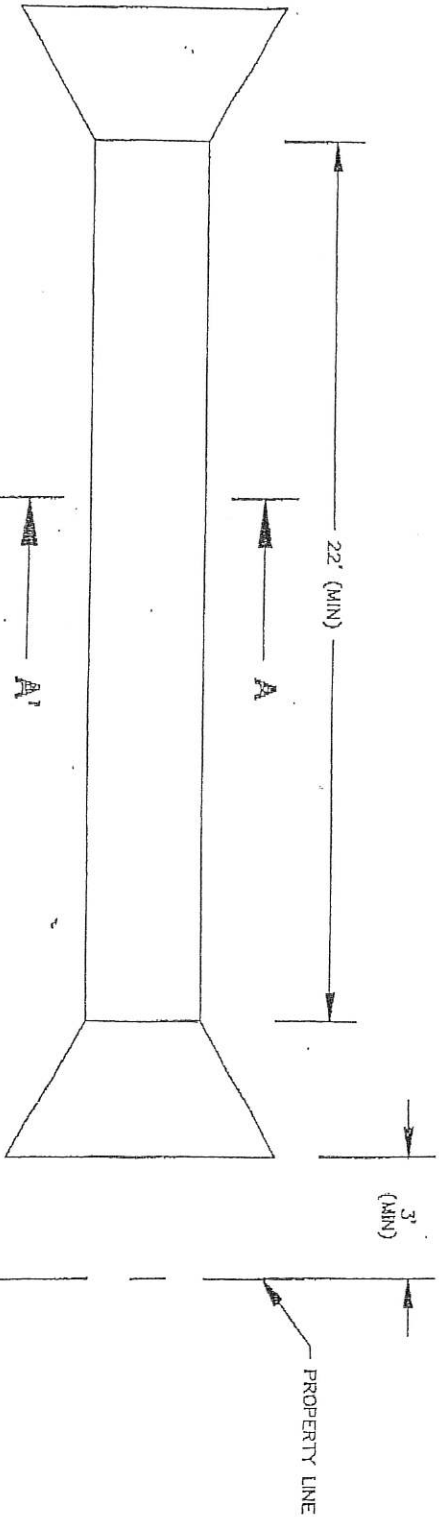
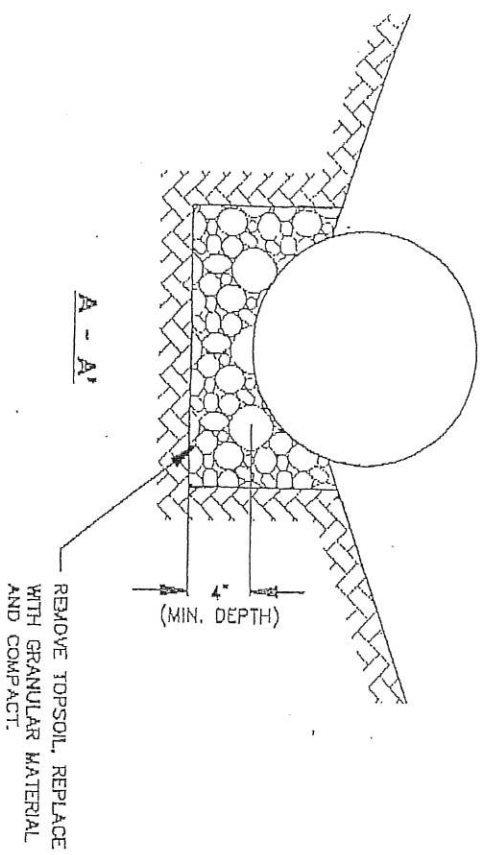
Chapter 500. Streets and Sidewalks

Article IV. Use of Rights-of-Way; Culverts, Driveways and Mailboxes

§ 500-20. Culvert regulations.

- A. Compliance required.
- (1) Prohibition. No person shall install a culvert, or travel on a Town right-of-way where a culvert is installed, unless the culvert fully complies with the regulations of this article.
 - (2) Culvert required. A culvert permit shall be obtained prior to a building permit being issued. The culvert must be properly installed prior to a footing inspection being completed. The installation of all culverts in the Town of Genesee shall be done by the property owner or its agent or designee.
 - (3) Permit required. No person, firm or corporation shall make any excavation or fill or make any alteration in any highway right-of-way or in any manner disturb any highway right-of-way or install or have installed or caused to be installed any culvert which is within or will allow access or easement to property in the Town of Genesee without first obtaining a culvert sizing permit.
 - (4) Purpose. The intent of this section is to assure drainage ditch preservation and to assure adequate surface water and stormwater drainage.
- B. Definition. Culverts are those structures which function to convey surface water through an embankment or under a roadway or under a driveway.
- C. Design specifications.
- (1) Public Works Superintendent's determination.
 - (a) The location and grade of culverts shall be determined by the Public Works Superintendent, consistent with the criteria stated in this article.
 - (b) The size and specification of culverts shall be determined by the Public Works Superintendent, consistent with the criteria stated in this article.
 - (c) The inspection of culverts, after installation, shall be made by the Public Works Superintendent, consistent with the criteria stated in this article.
 - (2) Special design criteria.
 - (a) Apron ends shall be provided on cross-road culverts and driveway culverts, unless approved by the Town Public Works Superintendent.
 - (b) All driveway culverts shall be at least 15 inches in diameter, and no driveway culvert shall be less than 22 feet plus end sections or more than 30 feet plus end sections in length at the outer street edge unless special permission is obtained from the Town Board.
 - (3) Standard material and construction specifications. The applicable portions of the most current edition of the State of Wisconsin, Department of Transportation, Standard Specifications for Road and Bridge

TOWN OF GENESEE
STANDARD DRIVEWAY CULVERT INSTALLATION



PLAN VIEW

- NOTES:
1. INVERT OF CULVERT TO MATCH DITCH FLOW LINE UNLESS OTHERWISE DIRECTED BY TOWN.
 2. END SECTIONS REQUIRED ON ALL CULVERTS
 3. CULVERT DIAMETER TO BE SPECIFIED BY TOWN.

BUILDING PERMITS

Building permits are required for most improvement projects to your property such as new residence, remodels, additions, pole barns, decks and pools. Please contact the Town Building Inspector prior to commencing any construction project to determine what (if any) permits are needed or required.

Building Inspector: Paul Launer

In office hours: Monday and Wednesday 9:30 - 10:30 am, Thursday by appointment

Phone hours: Monday – Friday 7 a.m. to 4 p.m. 262-825-8820

Zoning Permits are required for ALL building permits

- Zoning Permit – click for application See Zoning Permit information

The following items may be required for building permits –

- One (1) accurate copy of site plan or plat of survey (preferred)
- Ditch Permit / House number application – click for application
- One (1) complete set of plans
- One (1) copy of the sanitary permit
- One (1) heat loss calculations for new homes and additions
- One (1) Erosion Control Plan – 1 and 2 family homes, may be required for others permits, as directed by the Building Inspector
- The following applications may be necessary –
 - General Building Application - Click for form
 - Plumbing Application – Click for form
 - Electrical Application – Click for Form
 - HVAC Application – Click for form
 - Wisconsin Uniform Building Permit application form – new homes only – Click for form
- Contractors name, license numbers, address and phone number are required on the applications
- Preliminary Site Evaluation from Waukesha Co. Environmental Health, (Click for Waukesha County Parks and Land Use link for form) Prior to permit issuance
- Commercial permit applications may need additional information provided – contact Building Inspector for clarification

Form A - Highest Groundwater Table Determination Report

Project/Plat Name: _____ Date: _____

Project Location (PLS/CSM#): _____

Stamp, Sign & Date Here

The following table summarizes my interpretation of the soil profile evaluations conducted on the above noted site. The purpose of this report is to demonstrate compliance with a Waukesha County ordinance requirement to maintain basement floor elevations at least 1 foot above the highest groundwater table. I understand that the definition for highest groundwater table means the upper limit of the zone of soil saturation caused by underlying groundwater at its highest level. I certify that the information presented in this report represents my best professional judgment in estimating the highest groundwater table elevation based on soil and site evaluations in accordance with the procedures contained in Chapter SPS 385 Wisconsin Administrative Code.

Interpreters Signature: _____

Interpreters Printed Name/Credentials/Lic. #: _____

Interpreters Company Name/Address: _____

Site Benchmark/Elevation (Co. Stds.): _____

References: _____

Lot #	Soil Observ. (#)	Surface Elev. (NGVD 29)	Bottom Elev. of Soil Profile	Soil Map Unit Symbol (NRCS)	Elevation of Highest Groundwater Table	Depth to Highest Ground-Water Table (feet)	Proposed Basement Floor Elevation	Notes: List information used to determine the highest groundwater table, including any soil color pattern exemptions under SPS 385.30(3) for a basement floor proposed less than 1-foot above redoximorphic features shown in the referenced soil evaluation reports.

