



VILLAGE OF CALEDONIA
 5043 CHESTER LAND • CALEDONIA, WI 53402
 PHONE (262) 835-6420
DECK PERMIT APPLICATION (1 of 2)

Permit No.
Parcel No.
Receipt No.

Owner's Name		Owner's Email	
Owner's Mailing Address, City, State & Zip (if different from Project Address)			Phone ()
Contractor or Applicant Name		Contractor or Applicant Email	
Contractor or Applicant Mailing Address, City, State & Zip			Phone ()
Dwelling Contractor Certificate Number Exp. Date		Dwelling Contractor Qualifier Number Exp. Date	

PROJECT ADDRESS:

SETBACKS: Distance from lot lines to object	Front	Rear	Left	Right	ESTIMATED PROJECT COST
	Ft.	Ft.	Ft.	Ft.	
(Check one) <input type="checkbox"/> Attached to the main structure <input type="checkbox"/> Detached & Distance from the main structure _____ Ft. (The deck is not physically attached to the principal building and does not serve as an exit).					TYPE OF DESIGN (Check one) <input type="checkbox"/> ENGINEERED / STRUCTURAL ANALYSIS <input type="checkbox"/> UDC APPENDIX B, C

EXPLANATION OF PROJECT

SEE PAGE 2

* I, the undersigned, 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 municipality; and certify that all that information provided is accurate. All work performed associated with this permit shall be my responsibility when it comes to ensuring compliance. Any plans, specifications, or other written information supplied to the department at time of application is conditionally approved upon the issuance of this permit. It is further understood that the department must verify compliance at various stages of construction by performing inspections. Said inspections must be scheduled a minimum of two business days (48 hours) in advance. Construction shall not proceed until approved by the department.

PRINT CONTACT PERSON _____ Phone () _____

SIGNATURE OF APPLICANT _____ Date _____

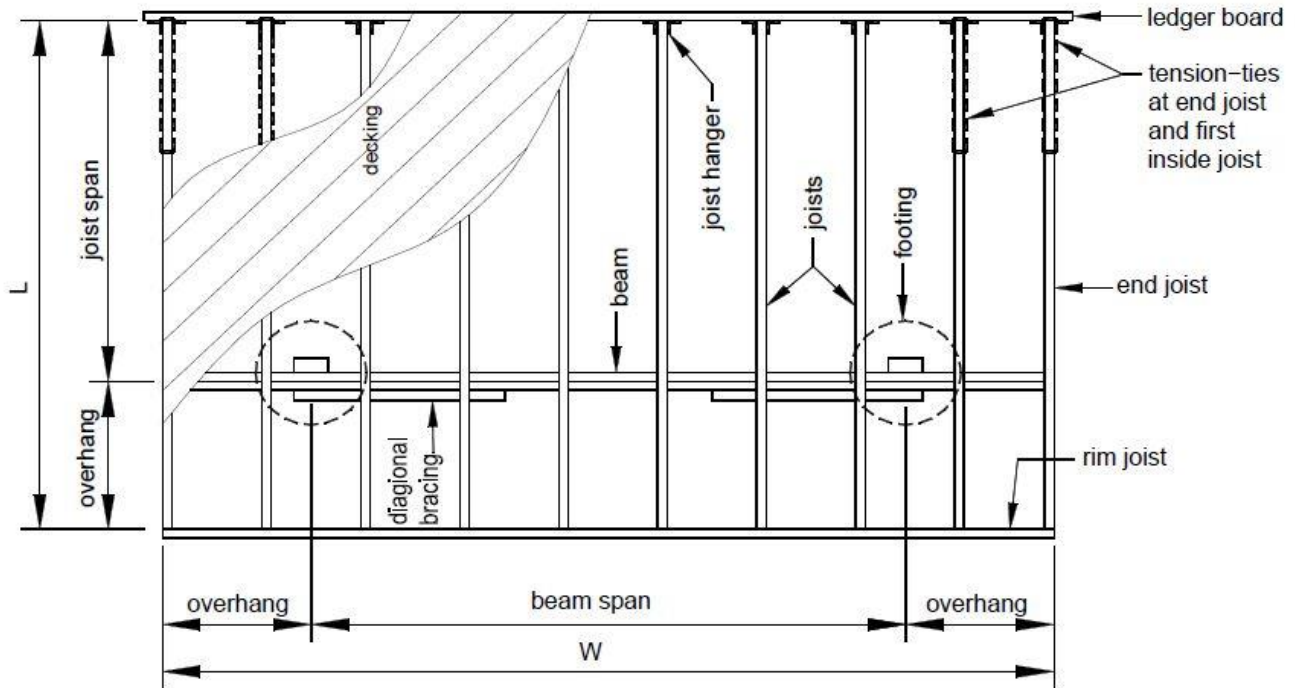
Zoning Approval	Planning Department	Date:
OFFICE USE (Check list)	FEES	PAYMENT
<input type="checkbox"/> PLANS	Zoning Fees..... \$	<input type="checkbox"/> Check
<input type="checkbox"/> APPLICATION PAGE 2	Building Fees \$	<input type="checkbox"/> Cash
<input type="checkbox"/> SURVEY	(\$0.45 per sq. ft. Min \$65)	<input type="checkbox"/> None
	Plan Review \$	
	TOTAL..... \$	



Permit No. _____
 Parcel No. _____

DECK PERMIT APPLICATION (2 of 2)

Figure 35
 TYPICAL DECK FRAMING PLAN



CHECK ALL THAT APPLY AND FILL IN THE BLANKS:

Decking:	<input type="checkbox"/> 2x4 <input type="checkbox"/> 2x6 <input type="checkbox"/> five-quarter board <input type="checkbox"/> wood-plastic composite (per ASTM D 7032) <input type="checkbox"/> Other decking, evaluation report number: _____
Joists:	Size: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 Spacing: <input type="checkbox"/> 12 in. <input type="checkbox"/> 16 in. <input type="checkbox"/> 24 in. Joint span dimension: _____ ft. - _____ in. Overhang: <input type="checkbox"/> Yes <input type="checkbox"/> No Overhang dimension: _____ ft. - _____ in. Rim joist: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12
Beam(s):	Number of plies: <input type="checkbox"/> 2 <input type="checkbox"/> 3 size: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 Overhang: <input type="checkbox"/> Yes <input type="checkbox"/> No Overhang dimension: _____ ft. - _____ in.
Posts:	Size: <input type="checkbox"/> 4x4 <input type="checkbox"/> 4x6 <input type="checkbox"/> 6x6 Height Above Grade: _____ ft. - _____ in Spacing: _____ ft. - _____ in
Footings:	Diameter: _____ in. Thickness: _____ in. Depth: _____ in. (48" min)
Ledger:	Ledger board size: <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 <input type="checkbox"/> Not applicable (free-standing deck) Fastener: <input type="checkbox"/> Through bolt <input type="checkbox"/> Lag screw <input type="checkbox"/> Wood screw <input type="checkbox"/> Expansion anchor <input type="checkbox"/> Adhesive anchor
Lateral support:	<input type="checkbox"/> Tension-tie <input type="checkbox"/> Diagonal bracing <input type="checkbox"/> Not required
Deck size:	L= _____ ft. - _____ in W= _____ ft. - _____ in