TOWN OF COLFAX LAND USE PERMIT APPLICATION

Completed application can be mailed to N8409 County Road M, Colfax, WI 54730 or emailed to townofcolfax@centurytel.net. Phone number 715-962-4629

PERMIT APPLICANT									
Last Name	First Name			Middle Initial					
Street Address	Email Address								
Sirect Address				Lii	iun ridaress				
City State			Zip Code Telephone No.			(Include area code)			
PROJECT LOCATION									
Building Address			bdivision N	lame		Lot #	Block #		
Legal Description1/4,1/4, SectionTN,			E or W	Parcel No.					
1. PROJECT TYPE 2. HVAC EQUIPMENT									
Garage ☐ Forced Air Furnace ☐ Radiant Baseboard or Panel ☐ Heat Purchaster ☐ Boiler ☐ Central AC ☐ Other:							•		
3. ENERGY SOURCE	Nat. Ga	ıs	L.P.	Oil	Elect.	Solid	Solar		
Space Heating Water Heating									
4. CONSTRUCTION TYPE			5. FOUNDATION						
☐ Site Constructed ☐ Manufactured (to the WI UDC; not U.S. HUD code)			☐ Concrete ☐ Masonry ☐ Treated Wood ☐ Other (specify):						
6. AREA	7.	7. ESTIMATED BUILDING COST							
Living area = Sc	\$	\$							
I vouch that all the above information is correct, and understand that the issuance of this permit is for administrative purposes only. I understand that onsite construction inspections will not be performed by the municipality and that property owners, builders, and contractors are primarily responsible for code compliance and reasonable care in construction.									
Applicant's Signature Date Signed									
MUNICIDALITY MUNICIPA	++					DINID			
MUNICIPALITY NUMBER: of Dwelling Location	#					FEE:	\$20.00		
PERMIT ISSUED BY:						DATE			