

# Village of Withee

Phone / Fax: 715-229-4319  
511 Division \* P.O. Box A \* Withee, Wisconsin 54498

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## BUILDING PERMIT APPLICATION

*Permits are void after 60 days*

Owners Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Contractor: \_\_\_\_\_  
Parcel #: \_\_\_\_\_

### TYPE OF IMPROVEMENT

\_\_\_\_\_ New Building      \_\_\_\_\_ Addition      \_\_\_\_\_ Repair/Replacement  
\_\_\_\_\_ Remodeling      \_\_\_\_\_ Demolition      \_\_\_\_\_ UDC Code Required

### DESCRIPTION OF PROJECT

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### PROJECT COST

TOTAL PROJECT COST \$ \_\_\_\_\_

### APPLICANT SIGNATURE

\_\_\_\_\_

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### *VILLAGE OFFICE USE ONLY*

PERMIT NUMBER: \_\_\_\_\_ PERMIT FEE: \_\_\_\_\_

DATE OF APPLICATION \_\_\_\_\_ PERMIT FEE PAID: \_\_\_\_\_