APPLICATION FOR BUILDING PLAN REVIEW
ONE OR TWO UNIT DWELLING

City of Madison Building Inspection
215 Martin Luther King Jr Blvd, Suite 017
Madison, WI 53703
planreview@cityofmadison.com

STATE SEAL
(for office use only)

Submittal Date: _____

Project Address: _____

Type of Building: ☐ SF home ☐ Duplex (one parcel) ☐ Twin home (two units with property line between)

Project Type: ☐ New building ☐ Addition ☐ Alteration ☐ Revision to previously approved plan

Number of Stories: ☐ 1 story ☐ 2 story ☐ Other_____ **Finished Basement?:** ○ Yes ○ No

Scope of Work: e.g. - New home, single story heated addition, unheated enclosed porch addition, screen room addition, new deck, finish basement, kitchen remodel, convert attic to habitable space, convert two-unit to Single Family, etc.

Estimated Cost: (full project cost minus the cost of plumbing, heating, electric, carpet, and cabinetry) $

Owner Information:

Name: _____

Phone number: _____

Email: _____

Contractor Information:

Company Name: _____

Phone number: _____

Email: _____

Dwelling Contractor Qualifier Number: _____

Dwelling Contractor Number: _____

Q

Designer Information (optional):

Name: Email:

Mechanical Contractors:

Plumbing Contractor:

Electrical Contractor:

HVAC Contractor:

Square Footage of new or altered building area

Basement: _____

1st, 2nd, and 3rd floors: _____

Garage: _____

Open porches/decks: _____

Total Square feet: _____

Square Footage of lot

Total Lot Area:

_____

Total square footage of all buildings and paved areas except sidewalks:

_____