



CITY OF MARSHFIELD

PERMIT APPLICATION

207 W. 6TH ST, MARSHFIELD, WI 54449

p: (715) 486-2016 | developmentsservices@ci.marshfield.wi.us

2020 Residential Accessory Building Permit Application

OFFICE USE ONLY		
Date Received:	Permit Number:	Parcel # :

Property Information		
Site Address:	Owner Address:	
Owner Name:	Owner Phone #:	Owner Email:

Contractor Information		
Company Name:	Address, City, State, Zip:	
Contractor Name:	DC #:	DCQ #:
Phone #:	Email:	

Foundation Contractor Information		
Company Name:	Address, City, State, Zip:	
Contractor Name:	Phone #:	Email:

Description of Work		

Valuation of Work (materials & installation cost) \$	Project Total Sq. Ft.	Height :
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Building Dimensions:			
Front Yard Setback (ft.):	Rear Yard Setback (ft.):	Side Yard Left Setback (ft.):	Side Yard Right Setback (ft.):
Separation from Principle Structure (if detached):		Street Side Yard Setback (if on a corner lot):	

Fees		
Accessory Building 299 sq. ft. or less	\$40.00	
Accessory Building 300 sq. ft. or more	\$0.15 / sq.ft.	
Foundation/Slab Only	\$40.00	
Failure to obtain a permit prior to commencing work will result in an additional \$100.00 fee or double the permit fee, whichever is more.		
Permit Fee Total (minimum fee \$40.00)		

This is a building permit application only. Electrical, HVAC, and Plumbing would need separate permit applications.

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Marshfield and with Wisconsin Building Codes; that I understand this is not a permit but only an application for a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of work which requires a review and approval of plans.

The applicant is Owner Contractor _____
 Applicant Signature

_____ Date