VILLAGE OF PULASKI

585 EAST GLENBROOK DRIVE • PO BOX 320
PULASKI, WI 54162
PHONE: 920-822-5182 • FAX: 920-822-5632
INFO@VILLAGEOFPULASKI.ORG

Permit No. _____

Check No. _____

Permit Fee: _____

DATE: _____

Roofing, Siding & Windows Permit Application

Project Address	_____
Applicant	☐ Owner ☐ Contractor ☐ Tenant ☐ Other (describe)_____
Owner/ Tenant	Name _____ Phone _____ Address _____ Email _____
Contractor	Company Name _____ Phone _____ Contact _____ Email _____ Address _____ State Credential #'s_____, _____, _____ Dwelling Contractor Qualifier # Dwelling Contractor # Building Contractor Registration #
Permit Type	☐ Residential ☐ Commercial
Location	☐ House ☐ House & Garage ☐ Commercial Building ☐ Accessory Structure
Project Information	**Roofing:** **Tear off all layers:** ☐ Yes ☐ No **Replace roof decking:** ☐ Yes ☐ No **Siding:** **Current Siding Material:** ☐ Vinyl ☐ Wood ☐ Steel ☐ Concrete ☐ Asphalt ☐ Stucco ☐ Other **New Siding Material:** ☐ Vinyl ☐ Wood ☐ Steel ☐ Concrete ☐ Asphalt ☐ Stucco ☐ Other **Windows:** **Number of Windows:** _____ **Window Type:** ☐ New Opening ☐ Replacement Same Size & Location
Project Description	_____ _____ _____
Mechanical Permits	Separate permits will be obtained for the following: Electrical by: _____ Plumbing by: _____ Heating by: _____
Value of Job	$ _____ (Value for materials & labor is req. to ensure consistency in accessing permit fees for all applicants) Payment by: ☐ Check # _____ ☐ Cash ☐ GovPay Trans # _____

I certify the above information is complete and accurate. Any deviations from the above submitted information may require additional permits to be obtained. I acknowledge and agree to these terms.

Name: _____ (please print) Date: _____

Signature: _____ Approved by: _____

APPLICANT SHALL CALL THE INSPECTION DIVISION FOR REQUIRED INSPECTIONS: 920-822-5182

Reasonable Accommodations for persons with disabilities will be made upon request and if feasible.