

**Town of Holland**  
W7937 County Road MH  
Holmen, Wisconsin 54636  
Phone: (608) 526-3354  
Fax: (608) 526-6564

**APPLICATION for BUILDING, PLUMBING, HEATING and ELECTRICAL PERMITS**

Zoning Permit No. \_\_\_\_\_

Date: \_\_\_\_\_

Holland Permit No. \_\_\_\_\_

Parcel No. \_\_\_\_\_

Address of Construction or Installation \_\_\_\_\_

Property owner's name \_\_\_\_\_

The undersigned hereby applies for the following permit:

PURPOSE	COST of PROJECT	COST of PERMIT
<input type="checkbox"/> Building _____	_____	_____
<input type="checkbox"/> Electrical _____	_____	_____
<input type="checkbox"/> Plumbing _____	_____	_____
<input type="checkbox"/> Heating _____	_____	_____
<input type="checkbox"/> Other _____	_____	_____
Total	\$ _____	\$ _____

Architect or Designer \_\_\_\_\_

General Contractor \_\_\_\_\_ Phone Number \_\_\_\_\_

Carpenter \_\_\_\_\_ Mason \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ Heating Contractor \_\_\_\_\_

Electrical Contractor \_\_\_\_\_

IT IS HEREBY AGREED between the undersigned as owner, his agent or servant, and the Town of Holland, that for and in consideration of the premises and of the permit to construct, erect, alter or install as above described, to be issued and granted by the Inspection Department, that the work thereon will be done in accordance with the description herein set forth in this statement; and it is further agreed to construct, erect, alter or install in strict compliance with all zoning and building laws of the Town of Holland and the State of Wisconsin; and to obey any and all lawful orders of the Inspection Department made or issued by virtue of the provisions of said ordinances. As a further condition of this permit, the undersigned owner, or his agent, hereby consents to entry on the premises described hereon, by the Inspection Department, at all reasonable hours, for the purpose of inspection. It is further agreed that 48 hours notice, (excluding Saturday and Sunday), must be given to said Inspection Department prior to inspection or granted of permit. Such notice shall be given at the office, of the Town Clerk, Town Hall, W7937 County Road MH., Holmen, WI 54636 526-3354. Mondays 8-4, Wednesdays 3-6, & Thursdays 8-1.

Contractor or Owner Name \_\_\_\_\_

(Please print)

Address \_\_\_\_\_

Signed \_\_\_\_\_

Phone Number \_\_\_\_\_

Application Approved Date \_\_\_\_\_, 20\_\_\_\_

Inspector Signature \_\_\_\_\_  
Inspectors Phone # 608-780-4672