



# City of **MENOMONIE**

**City of Menomonie**  
**Building Inspection/Zoning**  
800 Wilson Avenue  
Menomonie, WI 54751  
715-232-2221  
[www.menomonie-wi.gov](http://www.menomonie-wi.gov)

## **Residential Remodeling / Addition Permit Application**

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

**Owner:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Description of proposed work:** \_\_\_\_\_

**Estimated Project Cost:** \_\_\_\_\_

**General Contractor:** \_\_\_\_\_

**DC Certification #:** \_\_\_\_\_ **DCQ Certification #:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Telephone#:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\*Cautionary Statement to Owners Obtaining Building Permits: 101.65(lr) of the Wisconsin Statutes requires municipalities that enforce the Uniform Dwelling Code to provide an owner who applies for a building permit with a statement advising the owner that: If the owner hires a contractor to perform work under the building permit and the contractor is not bonded or insured as required under s.101.654(2)(a), the following consequences might occur: (a) The owner may be held liable for any bodily injury to or death of others or for any damage to the property of others that arises out of the work performed under the building permit or that is caused by any negligence of the contractor that occurs in connection with the work performed under the building permit. (b) The owner may not be able to collect from the contractor damages for any loss sustained by the owner because of a violation by the contractor of the one-and-two family dwelling code or an ordinance enacted under sub.(1)(a), because of any bodily injury to or death of others or damage to the property of others that arises out of the work performed under the building permit or because of any bodily injury to or death of others or damage to the property of others that is caused by any negligence by the contractor that occurs in connection with the work performed under the building permit.

As owner of the property, I have read the above cautionary statement and hereby accept the potential liability.

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Owners Signature

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Date

**Mail check and application to:** **City of Menomonie Inspection Department**  
**800 Wilson Ave**  
**Menomonie, WI 54751**

**You may submit an application by email to [inspection@menomonie-wi.gov](mailto:inspection@menomonie-wi.gov) if preferred.**

***Inspection appointments must be made by phone 24 hours in advance.***