

**Town of Russell-New Home/Remodel/Addition Construction Checklist**

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

**Date of Town Board Approval:** \_\_\_\_\_

(Note: All locates must be done by your contracted plumber. If as-builts are needed. Copies are your responsibility)

\_\_\_\_\_ Completed WI Uniform Building Permit Application, must contain house number obtained from County Clerk. Form is available from Town Clerk. (New homes only)

\_\_\_\_\_ Cautionary Statement (if applicable).

\_\_\_\_\_ Original and one (1) copy of completed listing of all Sub-Contractors.

\_\_\_\_\_ Original and one (1) copy of Standard Erosion Control Plan Form.

\_\_\_\_\_ Original and one (1) copy of completed DILHR Energy Worksheet.

\_\_\_\_\_ Two (2) copies of the Certified Survey Map with set-backs, existing, and proposed elevations of lot corners, ditch line and road, included/plus Erosion. Control plan may be included.

\_\_\_\_\_ Original and one (1) copy of application for Electrical Permit.

\_\_\_\_\_ Original and one (1) copy of application for HVAC Permit.

\_\_\_\_\_ Original and one (1) copy of completed application for Plumbing Permit.

\_\_\_\_\_ Dumping Permit (Clean fill only).

\_\_\_\_\_ Acknowledge Receipt of a copy of the as-built Survey Ordinance.

\_\_\_\_\_ Driveway permit.

\_\_\_\_\_ (A) MUST HAVE A RE-CERT. ON DRIVEWAY.

\_\_\_\_\_ FAILURE TO CALL FOR INSPECTION MAY RESULT IN A FORFEITURE.

\_\_\_\_\_ Two (2) copies of blueprints of the construction

\_\_\_\_\_ General Contractor supplies the Town with a certificate of insurance naming the Town of Russell as an additional insured

**IF SITE IS SERVED BY SEWER THE FOLLOWING IS NEEDED:**

_____ Connection fee & Assessment paid	_____ Yes	_____ No	_____ Receipt Number
_____ Meter & Reader, if applicable, given to Bill	_____ Yes	_____ No	_____ Date
_____ Was Street Opening Permit Obtained	_____ Yes	_____ No	_____ Receipt

**IF SITE IS NOT SERVED BY SEWER THE FOLLOWING IS NEEDED:**

\_\_\_\_\_ Copy of the approved sanitary permit

**MISCELLANEOUS ITEMS:**

\_\_\_\_\_ Has the Park Fund been Paid? \_\_\_\_\_ Yes \_\_\_\_\_ No

\_\_\_\_\_ Has Assessments been Paid? \_\_\_\_\_ Yes \_\_\_\_\_ NO

\_\_\_\_\_ Is property in Shoreland Flood Plain? County permit required if less than 300 feet from river/stream or less than 1,000 feet from a lake. \_\_\_\_\_ Culvert Size \_\_\_\_\_x\_\_\_\_\_ Town \_\_\_\_\_ Contractor \_\_\_\_\_ Culvert Slip

\_\_\_\_\_ Does the construction conform to all Town Ordinances? If not, variance, zoning change, or conditional use application may be necessary. Cost for each application/permit is \$350.

**Permit Fees:**

New Home-\$990	Remodeled home-\$350	Addition to home-\$450
Town of Russell State of Wisconsin Stamp Plan approval 7 inspections required	Town of Russell Plan approval 2 inspections required	Town of Russell Plan approval 3 inspections required

Inspectors will conduct inspections within 48 hours

If additional inspections are needed, additional expenses will be the responsibility of the homeowner

Final Occupancy will not be granted until all fees are paid

LIST OF CONTRACTORS FOR NEW DWELLING-Town of Russell

NAME OF APPLICANTS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SECTION #: \_\_\_\_\_ N S E W side of \_\_\_\_\_, \_\_\_\_\_ feet: N S E W from the intersection of \_\_\_\_\_

Please include name, phone, and license/certification number for each contractor

EXCAVATING CONTRACTOR \_\_\_\_\_

MASON CONTRACTOR \_\_\_\_\_

CONCRETE CONTRACTOR \_\_\_\_\_

CARPENTER CONTRACTOR \_\_\_\_\_

ELECTRICAL CONTRACTOR \_\_\_\_\_

INSULATION CONTRACTOR \_\_\_\_\_

HEATING CONTRACTOR \_\_\_\_\_

PLUMBING CONTRACTOR \_\_\_\_\_

ROOFING CONTRACTR \_\_\_\_\_

SIDING CONTRACTOR \_\_\_\_\_

PAINTING CONTRACTOR \_\_\_\_\_

LANDSCAPING CONTRACTOR \_\_\_\_\_

OTHERS, NOT LISTED ABOVE \_\_\_\_\_

OTHERS, NOT LISTED ABOVE \_\_\_\_\_

TOWN OF RUSSELL INFORMATION

New Home-Permit \$990	Home addition-Permit \$450	Remodeled Home-Permit \$350
Town of Russell State of Wisconsin Stamp Plan Review 7 required inspections Final occupancy approval	Town of Russell Plan Review 3 required inspections	Town of Russell Plan Review 2 required inspections

IF ADDITIONAL INSPECTIONS ARE REQUIRED, THE COST WILL BE PASSED ALONG TO THE BUILDER/CONTRACATOR

- Contractors need to contact inspectors and arrange for necessary inspections
  - The specific inspector information will supplied with your permit approval
- Inspectors will conduct inspections within 48 hours
- Additional inspection expenses will be the responsibility of the homeowner
- Final Occupancy will not be granted until all inspection reports have been filed and fees paid

Town of Russell  
Standard Erosion Control Plan for 1 & 2 Family Dwelling Construction Sites

According to Chapters ILHS 20 & 21 of the WI Uniform Dwelling Codes, a soil erosion control plan needs to be submitted and approved prior to the issuance of building permits for 1 & 2 family dwelling units in those jurisdictions where the soil erosion control provisions of the Uniform Dwelling Code are enforced. This Standard Erosion Control Plan is provided to assist in meeting this requirement.

Building inspectors have authority to request erosion control measures not specifically required by Code when such measures are deemed necessary to meet the Code's overall performance standard of keeping soil on site.

Construction projects that disturb more than 5 acres, or are part of a development that disturbs more than 5 acres, are required to obtain a construction site storm water discharge permit from the WI Department of Natural Resources.

Applicant: Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Address: \_\_\_\_\_

Landowner: Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Location of Building Site in Town of Russell:

ADDRESS: \_\_\_\_\_

SECTION #: \_\_\_\_\_ N S E W side of \_\_\_\_\_, \_\_\_\_\_ feet: N S E W from the intersection of \_\_\_\_\_

Instructions:

1. Complete this plan by filling in requested information, marking appropriate boxes, and completing the site diagram.
2. In completing the site diagram, consider potential erosion that may occur before, during, and after grading. Water runoff patterns can change significantly as a site is reshaped.
3. Chapters ILHR 20 & 21 of the WI Uniform Dwelling Code, the DNR Wisconsin Construction Site Best Management Handbook and UW-Extension Publication Erosion Control for Home Builders can be referred to for assistance in completing this plan. The Uniform Dwelling Code and Site Best can be ordered by calling: 608/266-3358. Erosion Control can be ordered by calling: 608/262-3346.
4. Submit this plan at the time of building permit application.

Place a checkmark in the appropriate blank below and complete the site diagram with necessary information:

Completed	Not Applicable	Site Characteristics
		North arrow, scale, and site boundary. Indicate and name adjacent streets or roadways
		Location of existing drainageways, streams, rivers, lakes, wetlands, or wells
		Location of storm sewer inlets
		The gradient and direction of slopes before grading operations
		The gradient and direction of slopes after final grading operations
		Location of existing and proposed buildings and paved areas
		Overland runoff (sheet flow) coming onto the site from adjacent areas
Completed	Not Applicable	Erosion Control Practices
		Location of temporary soil storage piles. <i>(Although not specifically required by Code, it is recommended that soil storage piles be placed behind a sediment fence or more than 25 feet from any downslope road or drainage.)</i>

		Location of grave access drive(s). (Recommended gravel drive design is 2-3 inch aggregate stone laid at least 7 ft. wide and 6 in. thick. Drives should extend from the roadway 50 ft. or to the house foundation, whichever is less.)
		Location of sediment fences (Filter fabric fence, straw bale fence) or vegetative strips that will prevent eroded soil from leaving the site.
		Location of diversions. (Although not specifically required by Code, it is recommended that concentrated flow (drainage) be diverted (re-directed) around disturbed areas. Overland runoff (sheet flow) from adjacent areas greater than 10,000 sq. ft. should also be diverted around disturbed areas.)
		Location of practices that will be applied to control erosion on steep slopes (greater than 12% grade). (Such practices include maintaining existing vegetation, placement of additional sediment fences, diversions, and re-vegetation by sodding or by seeding with use of erosion control mats.)
		Location of practices that will control erosion in areas of concentrated runoff flow. (Unstabilized drainageways, ditches, diversions, and inlets should be protected from erosion through use of such practices as in-channel or straw bale barriers, erosion control mats, staked sod, and rock rip-rap. When used, a given in-channel barrier should not receive drainage from more than two acres of unpaved area, or one acre of paved area. In-channel practices <b>should not</b> be installed in perennial streams.)
		Location of other planned practices not already noted.

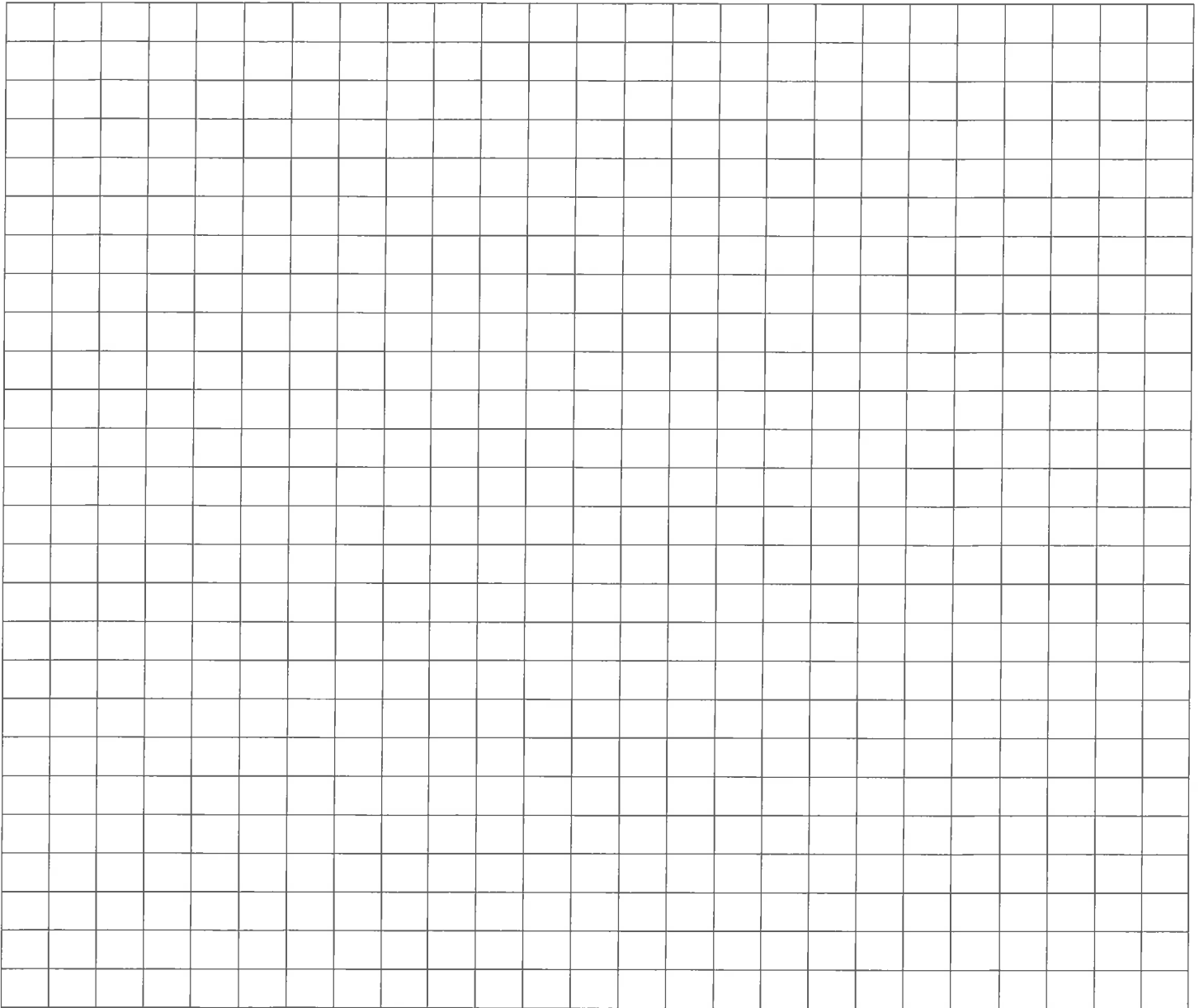
Planned	Not planned	Management Strategies
		Temporary stabilization of disturbed area. (Note: Although not specifically required by Code, it is recommended that disturbed areas and soil piles left inactive for external periods of time stabilized by seeding (between April 1 and September 15), or other cover such as tarping or mulching.)
		Permanent stabilization of site by re-vegetation or other means as soon as possible
		Use of downspouts and/or sump pump outlet extension. (Note: Although not specifically required by Code, it is recommended that flow from downspouts and sump pump outlets be routed to stable areas such as established sod or pavement)
		Trapping sediment during dewatering operations (Note: Although not specifically required by Code, it is recommended that sediment-laden discharge water from pumping operations be ponded behind a sediment barrier until most of the sediment settles out.)
		Proper disposal of building material waste so that pollutants and debris are not carried off-site
		<p>Maintenance of erosion control practices</p> <ul style="list-style-type: none"> <li>• Sediment will be removed from behind sediment fences/barriers before it reaches a depth that is equal to half the barrier's height</li> <li>• Breaks and gaps in sediment fences/barriers will be repaired immediately. Decomposing straw bales will be replaced (typical bale life is three months).</li> <li>• All sediment that moves off-site due to construction activity will be cleaned up before the end of the same workday.</li> <li>• All sediment that moves off-site due to storm events will be cleaned up before the end of the next workday</li> <li>• Gravel access drives will be maintained throughout construction.</li> <li>• All installed erosion control practices will be maintained until the disturbed areas they protect are stabilized.</li> </ul>

Agreement:  
I hereby certify that I understand the construction site erosion control provisions of the Wisconsin Uniform Dwelling Code, and that I accept responsibility for carry out the above erosion control plan as approved.












Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_


**-SITE DIAGRAM-**

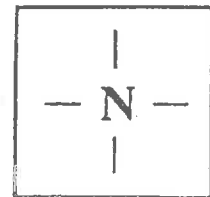
Any base map of usable scale can be substituted for sheet



**Site Diagram Legend**

- |   |  |
|---|--|
|  PROPERTY LINE                 |  SILT FENCE         |
|  EXISTING DRAINAGE             |  STRAW BALES        |
|  TEMPORARY DIVERSION           |  GRAVEL             |
|  FINISHED DRAINAGE             |  TREE PRESERVATION  |
|  LIMITS OF GRADING             |  STOCKPILED TOPSOIL |
|  VEGETATION SPECIFICATION AREA |  |

Please indicate north direction by completing the arrow. 



Scale:  
1 inch = \_\_\_\_\_ feet

TOWN OF RUSSELL, SHEBOYGAN COUNTY, WISCONSIN  
HEATING, VENTILATION, AND AIR CONDITIONING APPLICATION

DATE: \_\_\_\_\_ PERMIT #: \_\_\_\_\_ FEE: \_\_\_\_\_

The undersigned hereby applies for a permit to install heating, ventilating or air conditioning equipment as hereinafter described:

1. Location of Installation: \_\_\_\_\_
2. Owner's name(s): \_\_\_\_\_ Phone: \_\_\_\_\_
3. Owner's current address: \_\_\_\_\_
4. Contractor's name: \_\_\_\_\_ Phone: \_\_\_\_\_
5. Type of Building:
  - a. \_\_\_\_\_ One or Two-Family Residence
  - b. \_\_\_\_\_ Commercial-ILHR Plan Approval Date
6. Type of Insulation:
  - a. \_\_\_\_\_ New Boiler
  - b. \_\_\_\_\_ New Furnace
  - c. \_\_\_\_\_ Unit Heater(s) \_\_\_\_\_
  - d. \_\_\_\_\_ Roof Top Unit(s) \_\_\_\_\_
  - e. \_\_\_\_\_ Additional to existing System
  - f. \_\_\_\_\_ Fireplace or Wood burner
  - g. \_\_\_\_\_ Replacement of Equipment
  - h. \_\_\_\_\_ Air Conditioning
  - i. \_\_\_\_\_ Ventilation \_\_\_\_\_
  - j. \_\_\_\_\_ other \_\_\_\_\_
7. Description of work:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Type of Fuel \_\_\_\_\_
9. Calculated BTU Heat Loss \_\_\_\_\_
10. Size of Unit (BTU Rating)      INPUT \_\_\_\_\_      OUTPUT \_\_\_\_\_
11. Estimated cost \_\_\_\_\_
12. Scheduled start date \_\_\_\_\_

The undersigned hereby applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions herein set forth in this statement, and it further agreed to install in strict compliance with the heating and ventilating ordinances of the Town of Russell, Sheboygan County, and the State Heating & Ventilating Code of Wisconsin and to obey any and all lawful orders of the inspection of heating and ventilating.

Signed: \_\_\_\_\_

Phone: \_\_\_\_\_

TOWN OF RUSSELL, SHEBOYGAN COUNTY, WISCONSIN  
ELECTRICAL APPLICATION

DATE: \_\_\_\_\_ PERMIT #: \_\_\_\_\_ FEE: \_\_\_\_\_

The undersigned hereby applies for a permit for the execution of electrical installation for light, heat or power, as hereinafter described.

1. Location of Installation: \_\_\_\_\_
2. Owner's name(s): \_\_\_\_\_ phone: \_\_\_\_\_
3. Owner's current address: \_\_\_\_\_
4. Contractor's name: \_\_\_\_\_ Phone: \_\_\_\_\_
5. Type of Building:
  - a. \_\_\_\_\_ Residence
  - b. \_\_\_\_\_ Commercial
  - c. \_\_\_\_\_ Industrial
  - d. \_\_\_\_\_ Institution

6. Estimated cost \_\_\_\_\_ State of WI Certificate # \_\_\_\_\_

7. Description of work:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Scheduled start date \_\_\_\_\_

9. Comments: \_\_\_\_\_  
\_\_\_\_\_

The undersigned certifies that all the above information is correct. It is hereby agreed by the undersigned as owner, his agent or servant, and the Town of Russell, that for and in consideration of the premises and of the permit for the execution of electrical installation, for light, heat or power, as above described, to be issued and granted by the Electrical Inspector, and the work therein, will be done in accordance with the description herein set forth in this statement, and it is further agreed to alter and install the same in strict compliance with the Town of Russell, the Building Ordinance, the Wisconsin State Electrical Code, and to obey any or all lawful orders of the Electrical Inspector of the Town of Russell, Sheboygan County, Wisconsin.

Signed: \_\_\_\_\_

Phone: \_\_\_\_\_



TOWN OF RUSSELL, SHEBOYGAN COUNTY, WISCONSIN  
PLUMBING APPLICATION

DATE: \_\_\_\_\_ PERMIT #: \_\_\_\_\_ FEE: \_\_\_\_\_

The undersigned hereby applies for a permit for the execution of plumbing installation as hereinafter described.

10. Location of Installation: \_\_\_\_\_

11. Owner's name(s): \_\_\_\_\_ phone: \_\_\_\_\_

12. Owner's current address: \_\_\_\_\_

13. Contractor's name: \_\_\_\_\_ Phone: \_\_\_\_\_

14. Contractor's address \_\_\_\_\_ Credential # \_\_\_\_\_

15. Type of Building:

e. \_\_\_\_\_ Residence

g. \_\_\_\_\_ Industrial

f. \_\_\_\_\_ Commercial

h. \_\_\_\_\_ Institution

16. Estimated cost \_\_\_\_\_ State of WI Certificate # \_\_\_\_\_

17. Description of work: Complete the following chart and add any comments needed:

# to be installed	Fixture name		# to be installed	Fixture Name
	1. Sinks			8. Floor Drains
	2. Lavatories			9. Laundry Tubs
	3. Bath Tubs			10. Hose Bibs
	4. Water Closets			11. Bar Connections
	5. Showers			12. Sump Pumps
	6. Dishwashers			13. Water Softeners
	7. Garbage Disposals			14. Other

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Scheduled start date \_\_\_\_\_

9. Comments: \_\_\_\_\_

\_\_\_\_\_

The undersigned certifies that all the above information is correct and follows the Wisconsin Statute 145.06 (1) (a), stating that the plumbing work must be performed by a contracting master plumber. The applicant agrees to comply with the Wisconsin Uniform Dwelling Code and other municipal ordinances and understands that no legal liability, expressed or implied to the Town of Russell, Sheboygan County, Wisconsin.

Signed (owner): \_\_\_\_\_

Signed (Master Plumber): \_\_\_\_\_