



VILLAGE OF CALEDONIA
 5043 CHESTER LAND • RACINE, WI 53402
 PHONE (262) 835-6420

DECK PERMIT APPLICATION (1 of 2)

| |
|-------------|
| Permit No. |
| Parcel No. |
| Receipt No. |

| | | | |
|--|--|--|--------------|
| Owner's Name | | Owner's Email | |
| Owner's Mailing Address, City, State & Zip (if different from Project Address) | | | Phone () |
| Contractor or Applicant Name | | Contractor or Applicant Email | |
| Contractor or Applicant Mailing Address, City, State & Zip | | | Phone () |
| Dwelling Contractor Certificate Number Exp. Date | | Dwelling Contractor Qualifier Number Exp. Date | |

PROJECT ADDRESS:

| SETBACKS: Distance from lot lines to object | Front Ft. | Rear Ft. | Left Ft. | Right Ft. | ESTIMATED PROJECT COST \$ |
|---|--------------|-------------|-------------|--------------|--|
| (Check one) <input type="checkbox"/> Attached to the main structure <input type="checkbox"/> Detached & Distance from the main structure _____ Ft. (The deck is not physically attached to the principal building and does not serve as an exit). | | | | | TYPE OF DESIGN (Check one) <input type="checkbox"/> ENGINEERED / STRUCTURAL ANALYSIS <input type="checkbox"/> UDC APPENDIX B, C |

EXPLANATION OF PROJECT

SEE PAGE 2

* I, the undersigned, agree to comply with all applicable codes, statutes, and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the municipality; and certify that all that information provided is accurate. All work performed associated with this permit shall be my responsibility when it comes to ensuring compliance. Any plans, specifications, or other written information supplied to the department at time of application is conditionally approved upon the issuance of this permit. It is further understood that the department must verify compliance at various stages of construction by performing inspections. Said inspections must be scheduled a minimum of two business days (48 hours) in advance. Construction shall not proceed until approved by the department.

PRINT CONTACT PERSON _____ Phone () _____

SIGNATURE OF APPLICANT _____ Date _____

| Zoning Approval | Planning Department | Date: |
|---|-------------------------------|--------------------------------|
| OFFICE USE (Check list) | FEES | PAYMENT |
| <input type="checkbox"/> PLANS | Zoning Fees..... \$ | <input type="checkbox"/> Check |
| <input type="checkbox"/> APPLICATION PAGE 2 | Building Fees \$ | <input type="checkbox"/> Cash |
| <input type="checkbox"/> SURVEY | (\$0.45 per sq. ft. Min \$65) | <input type="checkbox"/> None |
| | Plan Review \$ | |
| | TOTAL \$ | |



VILLAGE OF
CALEDONIA

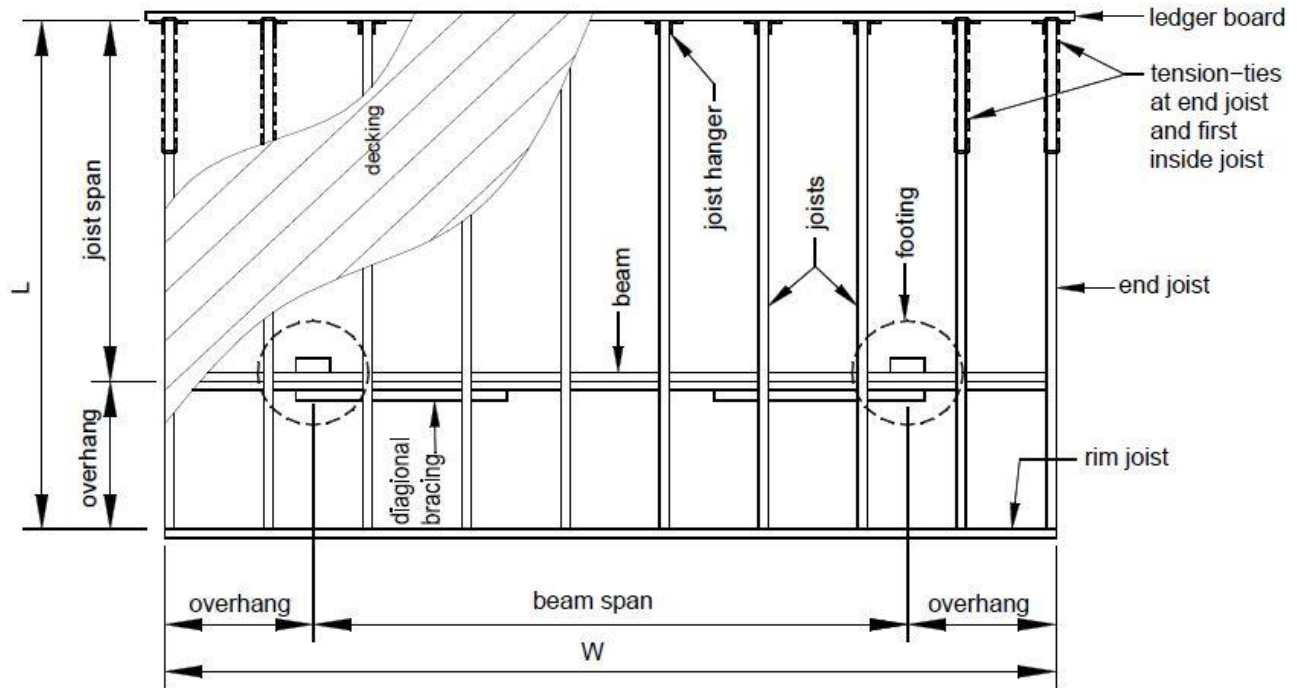
VILLAGE OF CALEDONIA
5043 CHESTER LANE • RACINE, WI 53402
PHONE (262) 766-7000

DECK PERMIT APPLICATION (2 of 2)

Permit No.

Parcel No.

Figure 35
TYPICAL DECK FRAMING PLAN



CHECK ALL THAT APPLY AND FILL IN THE BLANKS:

| | |
|-------------------------|---|
| Decking: | <input type="checkbox"/> 2x4 <input type="checkbox"/> 2x6 <input type="checkbox"/> five-quarter board <input type="checkbox"/> wood-plastic composite (per ASTM D 7032) <input type="checkbox"/> Other decking, evaluation report number: _____ |
| Joists: | Size: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 Spacing: <input type="checkbox"/> 12 in. <input type="checkbox"/> 16 in. <input type="checkbox"/> 24 in. Joint span dimension: _____ ft. - _____ in. Overhang: <input type="checkbox"/> Yes <input type="checkbox"/> No Overhang dimension: _____ ft. - _____ in. Rim joist: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 |
| Beam(s): | Number of plies: <input type="checkbox"/> 2 <input type="checkbox"/> 3 size: <input type="checkbox"/> 2x6 <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 Overhang: <input type="checkbox"/> Yes <input type="checkbox"/> No Overhang dimension: _____ ft. - _____ in. |
| Posts: | Size: <input type="checkbox"/> 4x4 <input type="checkbox"/> 4x6 <input type="checkbox"/> 6x6 Height Above Grade: _____ ft. - _____ in Spacing: _____ ft. - _____ in |
| Footings: | Diameter: _____ in. Thickness: _____ in. Depth: _____ in. (48" min) |
| Ledger: | Ledger board size: <input type="checkbox"/> 2x8 <input type="checkbox"/> 2x10 <input type="checkbox"/> 2x12 <input type="checkbox"/> Not applicable (free-standing deck) Fastener: <input type="checkbox"/> Through bolt <input type="checkbox"/> Lag screw <input type="checkbox"/> Wood screw <input type="checkbox"/> Expansion anchor <input type="checkbox"/> Adhesive anchor |
| Lateral support: | <input type="checkbox"/> Tension-tie <input type="checkbox"/> Diagonal bracing <input type="checkbox"/> Not required |
| Deck size: | L= _____ ft. - _____ in W= _____ ft. - _____ in |