OSHKOSH
ON THE WATER

CITY OF OSHKOSH

No 143184

BUILDING PERMIT - APPLICATION AND RECORD

Job Address 3555 MOSER ST **Owner** LLC PACUR **Create Date** 09/09/2010

Designer Larson Engineering **Contractor** GANTHER CONSTRUCTION

Category 211 - Alteration Industrial **Plan** No Formal Revi

Type ● Building ○ Sign ○ Canopy ○ Fence ○ Raze

Zoning _____ **Class of Const:** _____ **Size** _____

Unfinished/Basement _____ Sq. Ft. **Rooms** _____ **Height** _____ Ft. ☐ Projection

Finished/Living _____ Sq. Ft. **Bedrooms** _____ **Stories** _____ **Canopies** _____

Garage _____ Sq. Ft. **Baths** _____ _____ **Signs** _____

Foundation ● Poured Concrete ○ Floating Slab ○ Pier ○ Other
○ Concrete Block ○ Post ○ Treated Wood _____

Occupancy Permit Not Required **Occupancy Fee** $0.00 **Flood Plain** No **Height Permit** Not Required

Park Dedication Not Required **# Dwelling Units** 0 **# Structures** 0

Use/Nature of Work IND/ Construct new opening in firewall as per plans and structural calculations

HVAC Contractor _____ **Plumbing Contractor** _____

Electric Contractor _____

Fees: Valuation $15,500.00 **Plan Approval** $0.00 **Permit Fee Paid** $124.00 **Park Dedication** $0.00

Issued By: [signature] **Date** 09/17/2010 **Final/O.P.** 00/00/0000

☐ Permit Voided

Parcel Id # 1519606400

In the performance of this work I agree to perform all work pursuant to rules governing the described construction.
While the City of Oshkosh has no authority to enforce easement restrictions of which it is not a party, if you perform the work described in this permit application within an easement, the City strongly urges the permit applicant to contact the easement holder(s) and to secure any necessary approvals before starting such activity.
I have read and understand the afore mentioned information.

Signature [signature] **Date** 9/17/10
Agent/Owner

Address [redacted]

To schedule inspections please call the Inspection Request line at 236-5128 noting the Address, Permit Number, Type of Inspection (i.e. Footing, Service, Final, etc.), Access into Building if Secure (how do we gain entry), your Name and Phone Number. Unless specified otherwise, we will assume the project is ready at the time the request is received. Work may continue if the inspection is not performed within two business days from the time the project is ready.

City of Oshkosh
Inspection Services Division
P O Box 1130
Oshkosh, WI 54903-1130
Phone: (920) 236-5050
Fax: (920) 236-5084

OK TO ISSUE

OSHKOSH ON THE WATER

Building Permit Application

If you are a contractor participating in the Permit Fee Account System and have adequate funds, check here if you want this processed through your account ☐

JOB ADDRESS 3555 Moser Street

OWNER Pacur

CONTRACTOR Ganther Construction | Architecture

I am the: ☐ Owner **OR** ☒ Contractor

USE CATEGORY

☐Single Family ☐Duplex ☐Multi-Family ☐Rental ☒Commercial ☐Industrial

Work being done:

☐ Addition	☐ Deck/Porch/Patio	☐ Driveway/Parking
☐ External Remodeling	☐ Fence/Hedge/Kennel	☐ Garage/Utility Structure
☐ Handicap Ramp	☐ Hot Tub/Spa	☒ Internal Remodeling
☐ Sign/Canopy/Awning	☐ Stair/Handrail	☐ Stove/Fireplace
☐ Swimming Pool	☐ Wrecking Permit	
☐ Other _____		

For **External Remodeling, Wrecking Permit, and Internal Remodeling** please see **Chapter NR 447 of the Wisconsin Administrative Code and Notification Form 4500-113 on the DNR Asbestos Program** website; http://dnr.wi.gov/air/compenf/asbestos/.
For additional information on hazards present in buildings see the **Pre-Demolition Environmental Checklist** at http://dnr.wi.gov/org/aw/wm/publications/anewpub/WA651.pdf.

Additional information, such as plan submittal and approval, may be required before issuance. Fliers, located in the hallway, may be referenced to note if any additional information is necessary.

❖ Full description of work being done:

Create a new 12'-0" x 10'-0" opening in existing CMU wall and installation of rated coiling fire door.

Any work not included in this application is not permitted.

Value of the job $ 15,500 (Value for materials and labor is required to ensure consistency in accessing permit fees for all applicants.)

PLEASE READ, SIGN, & DATE:

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.

RECEIVED
AUG 25 2010
DEPARTMENT OF
COMMUNITY DEVELOPMENT
INSPECTION SERVICES DIVISION

Name: Andy Wilke (Please print)

Signature:

Date: 8/25/10

3/02