

TOWN OF BROOKFIELD**WAUKESHA COUNTY****WISCONSIN**BUILDING AND ZONING ADMINISTRATION
645 N. JANACEK ROAD, BROOKFIELD, WI 53045-6052GARY LAKE, BUILDING INSPECTOR
(414) 796-3790**APPLICATION FOR SWIMMING POOL AND DECK PERMIT**

Permit For : IN-GROUND POOL, ABOVE GROUND POOL, WHIRL POOL, DECK, OTHER					Tax Key Number	
OWNER'S NAME		ADDRESS			TELEPHONE	
CONTRACTOR'S NAME		ADDRESS			TELEPHONE	
ARCHITECT/ENGINEER'S NAME		ADDRESS			TELEPHONE	
PROJECT ADDRESS					PROJECT TELEPHONE	
SUBDIVISION					LOT #	BLOCK #
ZONING DISTRICT	LOT AREA	SETBACK /OFFSETS: FRONT		LEFT	RIGHT	REAR
ACCESSORY TO: RESIDENTIAL, COMMERCIAL, INSTITUTIONAL BUILDING				FOUNDATION: CONCRETE, MASONRY, P.T. WOOD, OTHER		
POOL DESIGN DATA:		CAPACITY [GAL]	WALL HEIGHT ABOVE GRADE		TYPE AND HEIGHT OF FENCE ENCLOSURE	
DECK DESIGN DATA:		SIZE [SQ. FT.]	DECK HEIGHT ABOVE GRADE		TYPE AND HEIGHT OF RAIL ENCLOSURE	
WAUKESHA COUNTY PERMIT		ELECTRICAL PERMIT			DISTANCE FROM NEAREST ELECTRIC LINE	
PLAN COMMISSION APPROVAL DATE		BOARD OF APPEALS VARIANCE DATE			ESTIMATED PROJECT COST	

The Applicant agrees to comply with applicable requirements of the Wisconsin Administrative Code, the Rules of the Department of Industry, Labor, and Human Relations, the Wisconsin Uniform Dwelling Code, and the General Code of the Town of Brookfield.

The Applicant certifies that all of the information herein submitted is accurate and that a permit granted shall create no legal liability, express or implied, on the Department of Building Inspection and Zoning Administration of the Town of Brookfield. This permit expires after 12 months from the date of issuance.

Signature of Applicant : _____ Owner Agent Contractor Date: _____

DEPARTMENT ENTRIES ONLY		
TAX KEY NUMBER	ASSIGNED PERMIT NUMBER	PERMIT DATE
PERMIT FEE PAID	PERMIT RECEIPT NUMBER	BASE PERMIT REFERENCE