



730 Washington Ave Rm. 103
 Racine, WI 53403
 Phone: (262) 636-9164
 Fax: (262) 636-9329

City of Racine Building Division

ANTENNA/SATELLITE

PERMIT NUMBER _____

APPLICATION FORM (only needed for Commercial Locations)

Project Address

Owner

Contractor

Address

Address

City/ZIP

City/ZIP

Email

Email

Phone

Phone

Description of work

Project Cost

Total number of Antenna/Satellite: _____ .

Note: **ANY WORK DONE WITHOUT PERMITS MAY RESULT IN DOUBLE PERMIT FEES.**

Per Sec. 18-93 all building permits are valid for a period of eighteen (18) months from date of issuance.

The undersigned hereby makes application for this permit to do the work herein described and as shown on the attached Construction Plans, Site Survey, and hereby agree that all work will be done in accordance with all applicable codes and ordinances of the State of Wisconsin, and the City of Racine.

Signature

Print name

Date

PERMIT FEE

\$350.00 per Antenna Structure

PERMIT APPLICATION PROCEDURES

Applications must include:

Completed Antenna/Satellite Permit Application form.

Site Plan of Proposed Location on the Lot.

Constructions Plan (If Required).

Permit Payment.