730 Washington Ave Rm. 103
Racine, WI 53403
Phone: (262) 636-9171

City of Racine Building Division

ELEVATOR PERMIT APPLICATION

PERMIT NUMBER _____

Project Address

Owner		Contractor	
Address		Address	
City/ZIP		City/ZIP	
Email		Email	
Phone		Phone	

Description of Work

Project Cost

Demo Cost (If Applicable)

Project Type ☐ Commercial or ☐ Residential

Project Detail

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

PERMITFEE $150

(Additional fees may apply: Plan Review)

PERMIT APPLICATION PROCEDURES

Applications must include:

- ☐ Completed Elevator Permit Application
- ☐ Constructions Plan
- ☐ Permit Payment
- ☐ Copy of DC & DCQ Number (Residential)