

Village of Gilman

Phone (715) 447-8650 / Fax: (715)-447-8134
380 E. Main Street * P.O. Box 157 * Gilman, Wisconsin 54433

BUILDING PERMIT APPLICATION

Permits Applications are void after 60 days

Owners Name: _____
Address: _____
Phone Number: _____
Contractor: _____
Project Address _____
Parcel #: _____

TYPE OF IMPROVEMENT

_____ New Building _____ Addition _____ Repair/Replacement
_____ Remodeling _____ Demolition

DESCRIPTION OF PROJECT

PROJECT COST

TOTAL PROJECT COST \$ _____

APPLICANT SIGNATURE

VILLAGE OFFICE USE ONLY

PERMIT NUMBER: _____ PERMIT FEE: _____

_____ UDC Permit Required _____ Zoning Permit Required
_____ State Inspector

DATE OF APPLICATION _____ PERMIT FEE PAID: _____