

Phone (414) 206-3915 Fax (414) 351-8819 http://www.village.bayside.wi.us/

APPLICATION FOR CERTIFICATE OF COMPLIANCE

Property Address	·	Bayside, WI 53217
Seller		
Seller's Address		
Seller's Phone		
E-mail Address		
Buyer (if known)		
Buyer's Address		
Buyer's Phone		
Please select one	:	
-		nitial inspection, follow-up inspection, and up to two follow-up uld be billed at the hourly rate of \$50, one-hour minimum.
-	The two-for - \$140 — Initial inspect ourly rate of \$50, one-hour minimu	ion and one follow-up inspection. All additional inspections would um.
•	lust the basic - \$100 — Initial inspec , one-hour minimum.	ction. Any follow-up or additional inspections would be billed at the
including both u	nits of a duplex, all other dwelli	tor must be provided with entry into all areas of the structure, ng structures, and all structures on the property. A Certificate are performed. The fee paid is non-refundable.
Signature of Applicant		 Date
Print Name		
Timervame	Tax Key Number	
	Sq. Footage	
	Fee:	
	Date Issued	