

**REQUEST FOR PERMISSION TO START CONSTRUCTION FOR FOOTINGS AND FOUNDATIONS**

- Submission and departmental approval based on this request is limited to footings and foundation work.
- A complete submittal must be included with this request. The complete submittal shall include:
  1. DQA form F-62457, *Request for Permission to Start Construction for Footings and Foundations*
  2. DQA form F-62333, *Plan Approval Application*, available online at: <https://www.dhs.wisconsin.gov/library/f-62333.htm>
  3. The fee for permission to start construction for footings and foundations at hospitals, hospices, and free-standing emergency departments is **\$75.00**. The fee for all other health facility types is **\$80.00**.
  4. Construction documents as described under the administrative rule
- Direct questions about use or completion of this form to:  
 Plan Intake Phone: **414-227-4085**  
 Email: [dhsdqaplanreview@dhs.wisconsin.gov](mailto:dhsdqaplanreview@dhs.wisconsin.gov)

DHS Reference No.										Date Plans Received By DHS	
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Name – Facility (Legal Name)

Physical Address – Facility (Street Address)	City	County	State	Zip Code
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Project Description (*Briefly describe scope of project.*)

Prior to approval of plans and in accordance with Wis. Admin. Code chs. SPS 361 and DHS 83, 124, 131, and 132, we, the undersigned, request to begin **footing and foundation work ONLY, subject to the following:**

- The Department, at this time, **has not performed a detailed review.**
- The specific code requirements for the building or structure have been reviewed as set forth in Wis. Admin. Code chs. SPS 361 – 365 and DHS 83, 124, 131, or 132 and have shown compliance on the drawings.
- **Any changes required after the plans have been reviewed shall be per Wis. Admin. Code § SPS 361.32(2).**
- Prior to the start of construction, a **building permit** may be required from the local authorities having jurisdiction in accordance with the laws and ordinances.
- If this project is in an area not served by sanitary or sewer, a **sanitary permit** must be obtained prior to the issuance of a local building permit, per Wis. Stat. § 101.12(3)(h).

SIGNATURE – Owner		Date Signed		SIGNATURE – Designer		Date Signed	
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Name and Title – <b>Owner</b> ( <i>Print or type.</i> )				Name – <b>Designer</b> ( <i>Print or type.</i> )			
Name – Company				Name – Design Firm			
Street Address				Street Address			
City		State	Zip Code	City		State	Zip Code
Email Address				Email Address			