



VILLAGE OF BAYSIDE

Phone (414) 351-8811

Facsimile (414) 351-8819

Website: www.bayside-wi.gov

APPLICATION FOR CERTIFICATE OF COMPLIANCE

Property Address: _____ Bayside, WI 53217

Circle One: Single Family
 Condominium
 Duplex
 Multi-Family

Seller _____

Seller's Address _____

Seller's Phone () _____

Buyer (if known) _____

Buyer's Address _____

City _____ State _____ Zip Code _____

Buyer's Phone () _____

The undersigned acknowledges that the inspector must be provided with entry into all areas of the structure, including both units of a duplex, all other dwelling structures, and all structures on the property. A Certificate of Compliance will not be issued unless repairs are performed. The fee paid is non-refundable.

Signature of Applicant

Date

Print name

Tax Key Number
Sq Ft
Code Compliance Fee
Administrative Fee
Total
Certificate Number
Date Issued