



STATE OF WISCONSIN
 Department of Safety and
 Professional Services
 Industry Services Division

**Application for Waiver of Specific Code
 Sections of the Uniform Dwelling Code (UDC)
 for One and Two Family Dwellings Based on
 Religious Beliefs**

-Complete all pages-

NOTE: This form is authorized by Wis. Stat. § 101.648. Completion of this form is voluntary and any personal information you provide may be used for purposes unrelated to this form. [Wis. Stat. § 15.04(1)(m).]

Property Information
Number and Street
Zip
County of <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town
Of: _____

Owner Information
Name
Address
City, State, Zip
Contact Person:
Telephone Number:

Check applicable boxes for requested Uniform Dwelling Code waivers.

- Carbon Monoxide Detection (Attach additional materials as necessary.)
- Smoke Detection (Attach additional materials as necessary.)
- Plumbing (Attach additional materials as necessary.)
- Electrical (Attach additional materials as necessary.)

Verification by Owner:

I affirm that all of the following statements are true:

- My religious beliefs and the established tenets or teachings of the religious sect of which I am a member conflict with one or more dwelling construction standards.
- The dwelling for which this waiver is requested will be used solely as a primary residence for myself or the members of my household.
- This waiver is requested based upon the long-established tenets and teachings of the religious sect of which I am a member and this sect did not establish these tenets and teachings solely to avoid compliance with dwelling construction standards.
- I agree to modify this dwelling for which this waiver is requested to comply with the dwelling construction standards if I cease to adhere to the tenets and teachings of the religious sect of which I am a member and upon which this waiver is requested.

Owner's Signature	Date
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Municipal Official Approval:

City Village Town County

Of: _____

The political subdivision determines that all of the following are true:

- The political subdivision has no reason to believe that the statements provided by the owner on the waiver application form are untrue.
- The political subdivision is satisfied that the waiver will not result in an unreasonable risk of harm to public health or safety.
- This waiver specifies those dwelling construction standards with which the owner is not required to comply.

The requested waiver is hereby:

- Approved
- Recommended for Denial (If denial action is recommended by the local municipality, return this application to: DSPS – State of Wisconsin, Madison – Industry Services, PO Box 7162, Madison, WI 53707-7162.)

Printed Name & Title	
Municipal Official Signature	Date

Comments/Findings:

State Review: (Only required if application denial is recommended by municipality.)

- Approved
- Denied (If denial action is taken by the Department of Safety & Professional Services, please indicate reasoning below.)

Printed Name & Title	
State Official's Signature	Date

Comments/Findings:
