

Application Uniform Permit for Heating, Ventilating & Air Conditioning Village of Sussex

Permit #:

Key #:

N64 W23760 Main St., Sussex WI 53089

(262) 246-5212 Office

(262) 246-5222 Fax

Owner's Information			
Name:		Address:	
City, State, Zip:		Telephone: ()	
Contractor's Information			
Contractor/Company Name:		Address:	
Contact Name:		City, State, Zip:	
Heating License #	Telephone #:	Email:	
Project Information			
Project Location:		Subdivision Name:	
Project Description:			
Electrical Contractor:		Telephone #:	
Electrical License Number:		Completion Date:	Estimated Cost of Job:
Schedule of Inspection Fees			
New Building, Replacement and Modifications of Heating and Air Conditioning Equipment and Miscellaneous Items			
	Rate	Count	Fee
Gas, Oil or Alternative Fuel Furnace & Boiler: One & Two Family - 1 st 150,000 BTU.	\$		\$
Commercial - 1 st 150,000 BTU.			
Ea. Add'l 50,000 BTU or fraction thereof ..			
Air Conditioning: One & Two Family - 1 st 3 tons			
Commercial - 1 st 3 tons			
Ea. Add'l 1 Ton or fraction thereof			
Fireplace and Wood Burning Stove			
Commercial/Industrial Exhaust Hoods and Exhaust Systems			
Heating & A/C Distribution Systems (Ductwork) - per 100 sq.ft. of Area Heated/Air			
Conditioned. This distribution system serves _____ sq. ft.			
Plan Exam Fee			
Re-inspection Fee			
Failure to Call for Inspection			
Double Fees will be charged if work is started before permit is issued.			
TOTAL PERMIT FEE			\$
<p>The applicant agrees to comply with all municipal ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, express or implied, of the department, municipality, agency or inspector, and certifies that all the above information is true and correct. Failure to comply may result in suspension or revocation of this permit or other penalties or forfeitures. Commercial and buildings housing over two families shall have State-approved heating plans with this application. Residential heating plans, heat loss calculations and specifications of the equipment to be installed in new buildings shall be submitted with this application. Final inspections are mandatory, please have permit number and addresses when requesting inspections. Give at least 24 hours notice. <i>I understand that all fees are non-refundable.</i></p> <p>Signature of Applicant: _____ Date: _____</p> <p>Print Name: _____</p>			
Fees	Permit(s) Required		Municipal Agent
Inspection \$ _____	Building Permit # _____		Name: _____
Plan Exam _____	State Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date: _____
Preliminary Fee _____	Date Approved: _____		
Balance Due _____			

Paid Check #

Certification #: