

W240 N3065 Pewaukee Road Phone – 262-691-9107 Fax – 262-691-6039	HVAC PERMIT APPLICATION CITY or VILLAGE OF PEWAUKEE *NOTE*: All Highlighted Areas must be completed	Permit No. Parcel No.
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Building Type	Use
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Building Site Address:		Suite No.
Owner's Name:	Mailing Address	Tel.
	Email Address	Cell#
Tenant's Name:	Mailing Address	Tel.
	Email Address	Cell#
Contractor Name:	Mailing Address	Tel.
	Email Address	Cell#
Contractor License #	Contractor License Expiration Date	

PROJECT DESCRIPTION	ESTIMATED PROJECT COST \$
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PROJECT TYPE	COMMERCIAL EXHAUST	Fireplace / Solid Fuel Appliances
<input type="checkbox"/> Single Family <input type="checkbox"/> Industrial <input type="checkbox"/> Other: <input type="checkbox"/> Multi-Family <input type="checkbox"/> Institutional <input type="checkbox"/> Commercial <input type="checkbox"/> Utility	No. of Units _____	No. of Units _____

1. PROJECT	3. STORIES	4. USE	5. HEATING
<input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Raze <input type="checkbox"/> Addition <input type="checkbox"/> Move <input type="checkbox"/> Other: _____	# of Stories _____ <input type="checkbox"/> Mezzanine <input type="checkbox"/> Other <input type="checkbox"/> Plus Basement	<input type="checkbox"/> Seasonal <input type="checkbox"/> Permanent <input type="checkbox"/> Other: _____	Furnaces No. of New _____ No. of Additions _____ No. of Replacement _____

2. AREA INVOLVED (sq. ft)				6. COOLING						
AREA	UNIT 1	UNIT 2	TOTAL	A/C Units						
Unfin. Bsmnt				No. of New _____ No. of Additions _____ No. of Replacement _____						
Finish Bsmnt				7. ENERGY SOURCE						
1 st Flr Living										
2 nd flr Living				Fuel	Nat. Gas	LP	Oil	Electric	Solid	Solar
3 RD flr Living				Space Htg						
Att. Garage				Water Htg						
Enc. Porch				<input type="checkbox"/> Dwelling unit has 3 Kilowatt or more in Electric Space Heating Equipment Capacity						
Open Porch				8. HEAT LOSS						
Deck				_____ BTU/HR Total calculated envelope and infiltration losses						
Other:				("maximum" on) allowable Heating Equipment Output on Energy Worksheet; Total building heating load Rescheck report						
Totals										

I agree to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understand that the issuance of the permit creates no legal liability, express or implied, on the state or municipality; and certify that all the above information is accurate. I expressly grant the building inspector, or the inspector's authorized agent, permission to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the work which is being done.

I vouch that I am or will be an owner-occupant of this dwelling for which I am applying for an electrical or construction permit without a Dwelling Contractor Financial Responsibility Certification or electrical license and have read the cautionary statement regarding contractor responsibility. No refunds issued after work has begun. By applying for this permit, you are authorizing City personnel to inspect this property within the scope of their duties.

APPLICANT'S SIGNATURE _____	DATE SIGNED _____
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APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. See attached list if there are any conditions of approval.

***** ALL ROOFTOP AND GROUND MECHANICALS SHALL BE SCREENED FROM PUBLIC VIEW *****

PERMIT FEES:	Fees for work begun without permit	ACTIVE PERMITS	PERMIT ISSUED BY:
Permit \$ _____ Total \$ _____ From fee calculations OR Minimum, whichever is greater	<input type="checkbox"/> FAILURE TO OBTAIN PERMIT FEES DOUBLE Total Doubled \$ _____	Active building permit No.? <input type="checkbox"/> Yes <input type="checkbox"/> No Permit # _____ Municipality # of Dwelling Location	Name _____ Date _____ Tel. _____ Cert No. _____



Building Services Department
 W240 N3065 Pewaukee Road
 Pewaukee, WI 53072
 (262) 691-9107 Fax: (262) 691-6039



HVAC PERMIT FEES WORKSHEET

OWNER: _____

PHONE: _____

ADDRESS: _____

Please note all permits must meet inspection fee minimum

DESCRIPTION

FEE

I. GENERAL

a. All Building Types - New Buildings, New Additions & Alterations to distribution system ~ Base Fee

\$50.00 base fee **plus** _____
 ____ 0.05/sq. ft/floor _____

Note: Residential Remodels & Additions must meet a minimum of \$120.00 flat fee
 Commercial Remodels & Additions must meet a minimum of \$200.00 flat fee

Misc Residential Fees

b. New Furnace/AC Unit, Additions or Replacements

____ \$60.00/unit _____

d. Fireplaces, Wood Burning Appliances

____ \$60.00 each _____

Misc Commercial Fees

e. Commercial Exhaust Units

\$150.00 first unit _____
 ____ x \$25.00/addl unit _____

f. New Furnace/AC Units, RTUs, Additions or Replacements

____ \$100.00/unit _____

Review Fees

g. No Review Fee on Residential

h. Commercial Application/Review - New Buildings or additions to commercial buildings

\$75.00 _____

Minimum Fees Required on all other permits

i. Minimum Residential Permit Fee for all other projects/Per Inspection

\$60.00 _____

j. Minimum Commercial Permit Fee for all other projects/Per Inspection

\$100.00 _____

SUBTOTAL

x2: Fees double if work started without permit.

TOTAL AMOUNT DUE
