

VILLAGE OF MUKWONAGO

440 River Crest Court

Mukwonago, Wisconsin 53149-0206

Phone 262-363-6419 office hour's 8:00 to 9:30

Monday through Friday Fax 262-363-6425

www.villageofmukwonago.com

APPLICATION FOR HEATING / VENTILATION AIR CONDITIONING PERMIT

PERMIT # _____

TAX KEY # _____

Project location: _____ Estimated Cost \$ _____ Contractor's Registration # _____

Project Description: Residential Commercial Industrial Institutional New Construction Replacement Remodeling

Owner's Name _____ Contractor's Name _____

Address _____ Address _____

City/ State, Zip _____ City/ State, Zip _____

Owners _____ Contractor's Phone _____ Contractors Email : _____

NEW BUILDINGS:

Furnace / ductwork / distribution systems: square footage for each floor level: Basement _____, Lower level _____, First floor _____, Second Floor _____, Additional area _____ = Total square footage _____ x \$0.05 = \$ _____

NEW AIR CONDITIONING

	Each	Count
Units up to 3 ton or 36,000 BTU's (per unit).....	\$ 60.00	\$ _____
For each additional ton or fraction thereof.....	\$ 17.00	\$ _____
Maximum per unit cost	\$750.00	\$ _____

NEW VENTILATION

Bathroom and kitchen ventilation system.....	\$ 20.00	\$ _____
Commercial intake systems	\$ 60.00	\$ _____
Commercial / Industrial exhaust hoods, or systems	\$165.00	\$ _____

REPLACEMENT OF HEATING and/or AIR CONDITIONING

Replacement of heating unit up to 150,000 BTU's (each unit).....	\$ 50.00	\$ _____
Each additional 50,000 BTU's or fraction thereof (each unit).....	\$ 17.00	\$ _____
Replacement of air conditioning unit up to 3 ton or 36,000 BTU's (each unit).....	\$ 50.00	\$ _____
Each additional ton or fraction thereof (each unit).....	\$ 16.50	\$ _____

ALTERATIONS TO DUCT SYSTEM

Adding additional register(s) with duct work or removing duct work.....	\$ 5.00	\$ _____
Adding, moving, removing trunk lines.....	\$ 10.00	\$ _____

PLAN REVIEW

State approved plans must be submitted for Commercial, Industrial, Condominiums, Multi-family..... \$ 60.00 \$ _____

MINIMUM PERMIT FEE..... \$ **60.00** \$ _____

ADMINISTRATIVE FEE for all permits..... \$ **5.00** \$ _____

Re-inspection fee, minimum of \$60.00..... \$ _____

Failure to obtain a permit prior to starting work: TRIPLE FEE. \$ _____

PERMIT INFORMATION / REQUIREMENTS

Application filled out incorrectly and returned to applicant \$25.00 service fee. An Electrical permit is required for all HVAC equipment being installed or replaced. A final inspection is required for all HVAC equipment installed. The applicant is required to arrange for all inspection appointments. For inspections 24 hour minimum notice is required, call 262-363-6419. Special site inspections, written reports for work done without a permit, failure to arrange and set-up inspections \$150.00 (Minimum)..... \$ _____

TOTAL FEES \$ _____

Signature of Applicant _____ Date _____

If you would like a copy of your permit please include your EMAIL. No refunds or credits on permits.

Permit expires one year from date issued for remodeling and follows state codes for other installations.

Conditions of approval: _____

Inspector _____ Date _____ Certification # _____

Receipt Date _____ Check # _____ Receipt # _____ Received by _____