

925 15 <sup>th</sup> Ave Union Grove, WI 53182 Office - 262-878-1818 Fax - 262-878-3782	<b>HVAC PERMIT APPLICATION          VILLAGE OF UNION GROVE</b>	Permit No.  Parcel No.
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<b>Building Type</b>	<b>Use</b>
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<b>Building Site Address:</b>	<b>Suite No.</b>
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Owner's Name:	Mailing Address	Tel.	
		FAX	
Tenant's Name:	Mailing Address	Tel.	
		FAX	
Contractor Name:	Mailing Address	Tel.	
		FAX	
Contractor License #			

<b>PROJECT DESCRIPTION</b>	<b>ESTIMATED PROJECT COST</b> \$
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<b>PROJECT TYPE</b>	<b>COMMERCIAL EXHAUST</b>	<b>Fireplace / Solid Fuel Appliances</b>
<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 _____

<b>1. PROJECT</b>	<b>3. STORIES</b>	<b>4. USE</b>	<b>5. HEATING</b>
<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 _____

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

**APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE SIGNED** \_\_\_\_\_

**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 for conditions of approval.

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

<b>PERMIT FEES:</b>	<b>Fees for work begun without permit</b>	<b>ACTIVE PERMITS</b>	<b>PERMIT ISSUED BY:</b>
Permit \$ _____	<input type="checkbox"/> FAILURE TO OBTAIN PERMIT FEES DOUBLE	Active building permit No. ?	Name _____
<b>Total</b> \$ _____	Total Doubled \$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date _____ Tel. _____
From fee calculations OR Minimum, whichever is greater.		Permit # _____	Cert No. _____
		Municipality # of Dwelling Location	
		51-186	