

Village of Dousman

118 S. Main Steet
Dousman, WI 53118

Permit #
Tax Key #
Building Permit #

Heating, Ventilating & Air Conditioning Permit Application

For Inspections Call: (262)-490-0513

PROJECT LOCATION (Building Location)	
PROJECT DESCRIPTION	<input type="checkbox"/> COMMERCIAL <input type="checkbox"/> ONE & TWOFAMILY

OWNER'S NAME	MAILING ADDRESS – INCLUDE CITY & ZIP	TELEPHONE – INCLUDE AREA CODE
CONTRACTOR'S NAME	MAILING ADDRESS – INCLUDE CITY & ZIP	TELEPHONE – INCLUDE AREA CODE

ESTIMATED COST:	LICENSE NUMBER:
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SCHEDULE OF INSPECTION FEES	EACH	.04/ Sq.Ft. (All Areas)	FEE
New Building.....	\$50.00	_____	_____
Addition.....	\$50.00	_____	_____
Remodel.....	\$50.00	_____	_____

REPLACEMENT, MODIFICATIONS OF HEATING AND AIR CONDITIONING EQUIPMENT AND MISC. ITEMS			
Gas, Oil, Electric Furnace and Boiler			
One and Two family - First 150,000 BTU.....	\$35.00	_____	_____
Commercial – First 150,000 BTU.....	\$65.00	_____	_____
All over 150,000 BTU.....	\$25.00/50,000 BTU	_____	_____
Air Conditioning:			
One and Two family.....	\$35.00	_____	_____
Commercial.....	\$65.00	_____	_____
All over 36,000.....	\$10.00/12,000BTU	_____	_____
Fireplace or Wood Burning Stove.....	\$50.00	_____	_____
Electrical Baseboard, Wall Unit and Cabinet Unit.....	\$3.00/KW	_____	_____
Duct work Alteration.....	\$35.00	_____	_____
Commercial Kitchen Hood System	\$75.00	_____	_____
Other	\$50.00	_____	_____
Minimum Permit Fee	\$50.00 Each		
Reinspect Fee	\$50.00 Each		
Failure to call for inspection.....	\$100.00 Each		
DOUBLE FEES ARE DUE IF WORK STARTED BEFORE PERMIT IS ISSUED			

The applicant agrees to comply with the 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 accurate. Have Permit/Application number and address when requesting inspections. Give at least 48 hours notice on all inspections.

SIGNATURE OF APPLICANT _____ DATE _____

FEES:	RECEIPT	PERMIT EXPIRATION:	PERMIT ISSUED BY MUNICIPAL AGENT:
Inspection Fee \$ _____ NO REFUNDS ON PERMITS	Ck# _____ Date _____ From _____ Rec. By _____	Permit Expires 2 Years from date unless otherwise noted below. _____	Name _____ Date _____