Town of F	² almyra	HVAC Permit Application					
Mail To: PO BOX 25 OKAUCHEE WI 53069			Permit N	Permit No			
Make Check Payable to:							
WIA or Wisconsin Inspection Agency			Residen	Residential Commercial			
	<u> </u>	ections: 262-490-0513 / 24 H	lour Notice Red	quired			
Project Location	Building address						
Project Description							
Owner's Name		Mailing Address, City & Zip	Telephone & Area Code				
Contractor's Name	License No	Mailing Address, City & Zip		Telephone & Ar	rea Code		
Estimated Cost of Pro	oject						
New /Exsisting				Price	Quantity	Total Fee	
Commerci	ial / Industrail		Minimum	\$75.00			
			Plus	\$.10 Per Sq Ft			
Agricultural			Minimum	\$50.00			
			Plus	\$.05 Per Sq Ft			
			TOTAL				
OTHER HVAC ITEM	S			Price	Quantity	Total Fee	
			TOTAL				
		PLIED IF WORK IS STARTED WI			Min Fee \$5		
	xpress or implied, of the	ordinances and with the conditions of this p department, agency, municipality or inspec					
Conditions of appro	•						
••							
Signature of Applican				Date			
<u> </u>		Office Use Only		FEES			
Check #		Building Inspector's Approval		Building			
Date				WI Seal			
Rcvd By	Signatu	ure		Electric			
	Date			Plumbing HVAC			

Note:

Other_

NO REFUNDS ON PERMITS