

Office Hours: 8 to 9:30 a.m. Monday through Friday Phone: (262) 363-6419 Fax: (262) 363-6425	<i>Village of Mukwonago</i> <i>Application and Record of</i> <b>Heating Permit</b>		Permit No. _____
Owner's Name _____			Tax Key # _____
Mailing Address _____	City _____	State _____	Zip _____
PROJECT LOCATION:	Project: <input type="checkbox"/> New Occupancy <input type="checkbox"/> Existing Bldg <input type="checkbox"/> Remodeling	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial	
Contractor's Name _____	Telephone _____		
State License # _____	Estimated Project Cost \$ _____	Fax _____	
Mailing Address _____	City _____	State _____	Zip _____

THE APPLICANT IS REQUIRED TO ARRANGE FOR INSPECTION APPOINTMENTS. Call (262) 363-6419 for inspections or information Monday through Friday 8:00 am to 9:30 am.

**NEW BUILDINGS**

Square footage of each floor level:

Basement Level	_____	square feet
Lower Level	_____	square feet
First Floor	_____	square feet
Second Floor	_____	square feet
Additional Area	_____	square feet
<b>TOTAL SQUARE FOOTAGE</b>	_____	

Total Square Footage \_\_\_\_\_ x \$.02 = \_\_\_\_\_

**NEW AIR CONDITIONING**

Units up to 3 tons or 36,000 BTU (each unit)	_____ x	\$50.00	_____
Each additional ton or fraction thereof (for each unit)	_____ x	\$16.00	_____
Maximum per unit cost	_____ x	\$750.00	_____

**NEW VENTILATION**

Residential intake or ventilation ducts (each)	_____ x	\$20.00	_____
Commercial / Industrial exhaust hoods, or systems (each)	_____ x	\$150.00	_____
Commercial / Industrial intake systems (each)	_____ x	\$60.00	_____

**REPLACEMENT OF HEATING AND/OR AIR CONDITIONING**

Replacement of heating unit up to 150,000 BTU (each)	_____ x	\$50.00	_____
Each additional 50,000 BTU or fraction thereof (each unit)	_____ x	\$16.00	_____
Replacement A/C unit up to 3 ton or 36,000 BTU (each)	_____ x	\$50.00	_____
Each additional ton or fraction thereof	_____ x	\$16.00	_____

**ALTERATIONS TO DUCT WORK**

Adding moving removing duct work (each)	_____ x	\$5.00	_____
Adding moving removing trunk lines (each)	_____ x	\$10.00	_____

**STORAGE TANKS FOR FUEL**

Installing tanks under 1,000 gallons or less (each tank)	_____ x	\$100.00	_____
Installing tanks over 1,000 gallons or more (each tank)	_____ x	\$175.00	_____
Fuel storage tank removal underground (each tank)	_____ x	\$175.00	_____

**SERVICE CHARGES**

Application not filled out properly and returned	_____ x	\$25.00	_____
Plan review	_____ x	\$50.00	_____
Minimum permit fee/re-inspection fee	_____ x	\$50.00	_____
Special inspection or written reports for work without a permit	_____ x	\$150.00	_____
Work started before a permit issued	_____ x	<b>DOUBLE FEES</b>	_____
Occupancy before final inspection passed	_____ x	\$200.00	_____

If you want a permit or receipt returned send a self addressed stamped envelope.

**TOTAL FEES** \_\_\_\_\_ \$ \_\_\_\_\_

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

Date: \_\_\_\_\_

Signature of  
Applicant \_\_\_\_\_

License Number: \_\_\_\_\_

Make Checks Payable To: Village of Mukwonago 440 River Crest Court - P.O. Box 206 Mukwonago Wisconsin 53149
Date _____
Check No _____ Amt \$ _____
Receipt No _____
Received by _____

<b>CONDITIONS OF APPROVAL</b>
_____
_____
_____

<b>Permit Issued By:</b>
Name _____
Date _____
Cert. No. _____