



HVAC PERMIT APPLICATION

VILLAGE OF GREENDALE
 6500 NORTHWAY
 GREENDALE, WISCONSIN 53129-0257
 (414) 423-2100 • FAX (414) 423-2107
www.greendale.org

PERMIT NO. _____

DATE: _____

PLEASE FILL OUT ALL INFORMATION BELOW COMPLETELY.

| | |
|-------------------|---------------------|
| Contractor Name: | JOB ADDRESS: |
| Address: | Owner Name: |
| City, State, Zip: | Address: |
| Email: | City, State, Zip: |
| Phone: | Email: |
| License #: | Exp. Date: |
| | Phone: |

DESCRIPTION OF WORK

| MAKE & MODEL OF FURNACE/BOILER | BTUs | MAKE & MODEL OF A/C | TONAGE |
|--------------------------------|------|---------------------|--------|
| 1) | | 1) | |
| 2) | | 2) | |

| NEW BLDG/REPLACEMENT/MODIFICATIONS TO: | RATE (\$): | COUNT/SF: | FEE(\$): |
|--|--------------------------|--|----------|
| GAS, OIL, OR ALTERNATIVE FUEL FURNACE OR BOILER: 1 & 2 FAMILY – 1 ST 150,000 BTU | 50.00/EA | | |
| <i>IF BOILER, LIST PLUMBER:</i> COMMERCIAL – 1 ST 150,000 BTU | 50.00/EA | | |
| EACH ADDT'L. 50,000 BTU OR FRACTION THEREOF (\$750.00 MAX/UNIT) | 16.00 | | |
| AIR CONDITIONING: 1 & 2 FAMILY 1 ST 3 TONS | 50.00/EA | | |
| COMMERCIAL – 1 ST 3 TONS | 50.00/EA | | |
| EACH ADDT'L. TON OR FRACTION THEREOF (\$750.00 MAX/UNIT) | 16.00 | | |
| ENERGY RECOVERY VENTILATORS | 50.00/EA | | |
| COMMERCIAL/INDUSTRIAL EXHAUST HOODS AND EXHAUST SYSTEMS | 175.00/EA | | |
| HEATING AND A/C DISTRIBUTION SYSTEMS (DUCTWORK) – PER 100 SF OF HEAT/AIR CONDITIONED SPACE. THIS DISTRIBUTION SYSTEM SERVES _____ SF. | 1.80/100SF MIN. 50.00 | | |
| LOCAL PLAN EXAM FEE | 60.00 | | |
| STATE PLAN EXAM FEE (BASED OFF SF OF PROJECT-SUBMIT SBD118 FORM-SEE FEE SCHEDULE ON OUR WEBSITE) | SEE CHART | | |
| MINIMUM PERMIT FEE | 50.00 | | |
| REINSPECTION FEE | 50.00/EA | | |
| FAILURE TO CALL FOR INSPECTION | 50.00 | | |
| DOUBLE & TRIPLE FEE TO BE CHARGE FOR WORK STARTE OR DONE WITH OUT PERMIT BEING ISSUED | | X2 (1 ST) X3 (2 ND) | |
| PERMIT EXPIRES AFTER 18 MONTHS, UNLESS WORK CEASES FOR A PERIOD OF 60 DAYS WITHOUT GOOD OR REASONABLE CAUSE. IF A PERMIT IS ISSUED AND NOT USED, ONLY THAT PORTION OF THE PERMIT FEE IN EXCESS OF \$30 WILL BE REFUNDED. NO PERMIT FEES SHALL BE REFUNDED AFTER THEIR EXPIRATION. | | | |

RECEIPT NO. _____ DATE PD: _____ TOTAL FEES: \$ _____

It is hereby agreed between the undersigned and the Village of Greendale that all work performed as herein described shall be completed in strict compliance with the Village of Greendale Plumbing Code and all laws of the State of Wisconsin relating to such work. Furthermore, by signing this application, or by authorizing an agent to sign this application, the owner/tenant acknowledges that an inspection or inspections of the work herein described are required and consents to the entry onto the subject property by an employee of the Village of Greendale to perform all necessary inspections. Said inspection(s) shall only be made at reasonable times and by appointment or notice.

 HVAC Contractor's Signature
 Homeowner's Signature

 ISSUED BY AN AUTHORIZED AGENT OF THE DEPT.

PAYMENTS CAN ALSO BE MADE ONLINE AT WWW.GREENDALE.ORG by Clicking on the "Online Payments" Button on the right hand side. Please include the Address of the Property and Type of Permit.

FOR INSPECTIONS CALL 423-2100 AT LEAST 24 HOURS PRIOR