

Permit # _____

Residential HVAC Permit-Village of Winneconne

Owners name _____ Phone _____

Project address _____

Contractors name _____ Phone _____

Contractors address _____ Fax #: _____

Type of occupancy _____

Job description _____

<u>Items</u>	<u>Count</u>	<u>Fees</u>
Base fee includes one furnace or A/Cunit		\$44.00
Duct work Alteration		\$27.50
Additional furnace or A/C units-\$27.50 each	_____	\$_____
Project Total Cost \$_____	Minimum Fee \$44.00	Total Fees \$_____

Owner/Contractor _____ Date _____

Inspector _____ Date _____

Payable to: Village of Winneconne 30 S. 1st St, P O Box 488 Winneconne WI 54986. PH: 582-4381 Fax: 582-0660

Mail to: Marty Johnson, 8291 Tritt Rd. Omro, WI 54963. Phone & Fax: 920-685-6755

- All work to meet the State Codes or reinspection fees will be charged for improper installations.
- The owner/contractor is responsible for making arrangements for the final inspection.