

BUILDING PERMIT APPLICATION

Town of Jackson

Project Address: _____

Owner: _____ Phone: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Contractor: _____ Phone: _____ Cell: _____

Address: _____ City: _____ State: _____ Zip: _____

HVAC Contractor Lic.* _____ HVAC Qualifier*: _____

Email: * _____

Please check all that apply:

Property type: 1 & 2 Family Multi-family Commercial Industrial Agricultural

Equipment: Furnace Boiler Heat Pump Central AC Solar/Geothermal
 HRV/EVR Fireplace Other New Additional Replacement

Fuel Source: Natural Gas LP Fuel Oil Electric

Misc: _____ Total BTU's* _____ Total Tons of Cooling* **Total HVAC Project Cost*** \$ _____

Heating & Air Permit Fee Schedule

Heating: \$55.00 per unit, up to & including 150,000 input units.
 \$18.00 additional fee for each 50,000 BTU or fraction thereof
 \$800.00 maximum per unit
 Count _____ \$ _____

Air: \$55.00 per unit up to 3 tons or 36,000 BTUs. Additional fee of
 \$18.00 each ton or 12,000 BTUs thereof.
 \$800.00 maximum/unit
 Count _____ \$ _____

HRV/EVR: \$55.00 per unit
 Count _____ \$ _____

Heating & Air Conditioning Distribution Systems:
 \$2.00/100 sq.ft. of conditioned area with a \$55.00 min. fee
 \$ _____

Commercial & Industrial Hoods/Exhaust Systems: \$180.00/ Unit
 \$ _____

Total Permit Fees \$ _____

Please note: Permit Fee will be doubled if work commences before obtaining a permit \$ _____

A separate Electrical Permit will be required and shall be completed by a licensed electrician

Mail permits to Town of Jackson, Attn: Jim Micech, Building Inspector, 3146 Division Road, Jackson, WI. 53037
 Email: building@town-jackson.com Phone: (414) 840-3416

All checks shall be payable to the Town of Jackson

Applicant agrees to comply with the Uniform Dwelling Code, Commercial Building Code and other Municipal Ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, express or implied, within the municipality and certifies that all of the above information is accurate.

Print Name: _____ Signature: _____ Date: _____