Town of Scott, Shebo	ygan County	H.V.A.C Pern	nit Applicati	ion	
Date: Permit #			UDC Permi		
Owner's Name			Phone		
Street Address			City	Zip	
Lot # Block #		Subdivisions			
Project Address					
ntractor's Name Contractor's Address, City, St, Zip					
Contractor's License/Certification #	s License/Certification # Contractor's Phone #				
Project Cost Sq. Ft. House					
***********	******	******	*****	******	
Heating Including Duct Work	Square Footage	of Living Area	\$0.04		
Air Conditioning	Square Footage	of Living Area	\$0.04		
Natural Gas Service Permit	No.		\$30		
Incinerator Unit/Fireplace/Air Conditioning /Fur	nace N	0.	<u> </u>		
Fireplace	No.		<u> </u>		
Gas Fireplace, Heating, Radiant Heating Unit	No).	<u> </u>		
Base Permit Fee PLUS ABOVE ITEMS			<u> </u>	\$50.00	
Reinspection Fee			\$75		
			TOTAL FEE		
Note: A Consultant all administrations will be used in a	ina a liaanaad a	la atolala o			
Note: A Sperate electrical permit will be required	using a licensed e	electrician.			
Note : If work is started before a permit is obtained, except in emergencies, the fee shall be doubled. Granting of a permit after work is started shall not relieve the licensee any liability for a penalty.					
The Undersigned hereby applies for a agrees that such work shall conform to the Wisconsin State Electrical Code and with the National electrical Code.					
Remarks:					
Signature of Applicant:			Date:		
Mail: Application and Supporting documents to		Building Inspect			
Town of Scott N1306 Boltonville Rd, Adell, WI 53	3001	Nick Thill P: 2 Anchored Inspe	62.277.1328		
Checks Payable to Town of Scott		anchorinspectll			
		•	- 5		
FOR OFFICE USE ONLY Paid on		Check	< #	Amount	