Town of Belgium
Building Department
c/o Roger Kison
610 11th Avenue
Grafton, WI 53024
414-333-4511

DATE RECEIVED	
PERMIT NUMBER	
TAX KEY NUMBER	
ZONING	

## **HEATING, VENTILATING & AIR CONDITIONING PERMIT APPLICATION**

OWNER'S NAME:	,					JILI		LICATIO		
ADDRESS:										
TELEPHONE:									***************************************	
CONTRACTOR'S NAME: _										
ADDRESS:										
TELEPHONE:						_				
PROJECT TYPE (check one) H\			HVAC EQUIPMENT ENERGY SC			JRCE (	check one)	VENT TO (check one)		
New		Forced Air	Furnace		LP Gas			Chimney		П
Additional		Radiant Ba	seboard or Panel		Natural Gas			Direct Vent		
Replacement		Heat Pump	)		Fuel Oil			Other (specify)		
Alteration		Boiler			Electric					
Other		Central Air	Conditioner		Other			and the second and distance of the second		
FEES FOR HEATING, VENTILA	TING	AND AIR CO	NDITIONING:		SF LIVING S	SPACE )	K \$0.035=			
Heating up to 150,000 B.T.U. input						\$50.00 per unit			\$	
Each additional 50,000 B.T.U.s or fraction thereof					\$16.00 per 50,000			\$	Participate of each of a	
Incinerator/Fireplaces/Woodstove						\$40 per unit			\$	
Air Conditioning - up to 36,000 B.T.U.						\$50.00 per unit			\$	
Air Conditioning - each additional 12,000 B.T.U.						\$16.00 per 12,000			\$	
Failure to take out permit					***************************************	DOUBLE FEE			\$	
						TOTAI	L HVAC PERMI	T FEE	\$	
FOR A/C INSTALLATION-INSERT HVAC CONTRACTORS CERTIFICATION NUMBER				TORS NAME	INSTALLERS CERTIFICATION NUMBER					
The applicant agrees to com and with the conditions of th Town; and certifies that all th	is per	mit; underst	MAIL CHEC 610 GRAF ling Code and other ands that the issua	TON,	of the permit crea	own of ates no	legal liability,	expressed o	or implied, on the	
Signature Date										
			FOR	R OFF	FICE USE:				REV 02	2/21
CHECK PAID BY						RECEIN	/ED			
ARGUINT DAID							A Section of the Sect			