



App No: _____

COMMERCIAL HVAC PERMIT APPLICATION

Section I - Location

a. **Project Address:** _____
 Commercial Industrial Multi-Family Tax Exempt

b. **Property Owner:** _____ Phone: _____
 Owner Address: _____ E-Mail: _____

c. **Business Name:** _____ Phone: _____
 Contact Person: _____ E-Mail: _____

Section II - Contractor

d. **Contractor:** _____ Phone: _____
 Address: _____
 Contact Person: _____ Phone: _____
 E-Mail: _____
 Electrician (if applicable): _____ Phone: _____

Section III - Project

f. **Permit for:** Heating A/C Kitchen Exhaust Hood Exhaust Ventilation System Distribtuion/ Ductwork Only

g. **Description of Work**
* If replacing equipment, submit "HVAC Replacement Addendum" form

h. **Estimated Cost of Construction:** \$ _____ **Permit Fee** _____

Section IV - Signatures

Owner: _____ Phone: _____
 Agent: _____ Phone: _____

By the signature of the property owner or agent for the owner and by the issuance of this permit the inspector(s) shall be granted access to the property to inspect for code compliance. Additionally, all work authorized by this permit shall be performed in a safe, legal and workmanlike manner with the permit work conforming to all applicable rules, codes, and regulations of the City of West Allis and the State of Wisconsin.

*** DO NOT WRITE BELOW THIS LINE ***

<p>Approved to Issue: _____ Date: _____</p> <p>Comments/Conditions</p>	<p>Date Stamp</p>
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