



Submit to:
 Inspections Department
 City of Two Rivers
 PO Box 87
 Two Rivers, WI 54241-0087
 Email: zoning@two-rivers.org
 Fax: 920-793-5512

HVAC PERMIT APPLICATION

1. Location of Install _____
2. Owner _____ Phone _____
3. Building/Structure
 Residence Commercial Industrial Institutional Accessory
4. Contractor _____ Phone _____
5. HVAC Contractor Registration # _____ Expiration Date _____

Number	Type	BTU/Ton	Brand	New	Replace
	Boiler				
	Furnace				
	Unit Heater				
	Roof Top Unit				
	Air Conditioner				
	Fireplace				
	Pellet Stove				
	Comm Exhaust Hood & System				
	Distribution System	New _____ Alterations _____			

Other:

<p><u>HVAC Permit Fees</u></p> <p>\$50.00 per unit, up to 150,000 BTU, plus \$10.00 per each 50,000 BTU or fraction thereof over \$150,000 BTU (\$500 max)</p> <p><u>Distribution Systems</u></p> <p>\$2.00 per 100 square feet of area for new construction (round up to next 100)</p> <p>\$50.00 minimum for alterations</p> <p>\$50.00 per unit for Commercial/Industrial exhaust hoods and systems</p>	<p><u>Location</u></p> <p>Rear and interior side yards only. Maintain at least 3 feet from interior and rear property lines</p>
Project Cost \$	Permit Fee \$

Signed _____
 (HVAC Contractor or Owner)

Date _____