

# Commercial HVAC Permit-Town of Neenah

Owner's name \_\_\_\_\_ Phone \_\_\_\_\_

Project address \_\_\_\_\_

Contractor's name \_\_\_\_\_ Phone \_\_\_\_\_

Contractor's address \_\_\_\_\_ Fax #: \_\_\_\_\_

Type of occupancy \_\_\_\_\_

Job description \_\_\_\_\_

Project Total Cost \$ \_\_\_\_\_

Building square foot \_\_\_\_\_ Times \$.02 = \$ \_\_\_\_\_ Plus \$35.00 Base fee = \$ \_\_\_\_\_

Owner/Contractor \_\_\_\_\_ Date \_\_\_\_\_

Inspector \_\_\_\_\_ Date \_\_\_\_\_

**Payable to:** Town of Neenah, **Mail to:** Gary Klinka, 228 Mandella CT Neenah, WI 54956.

Phone: 920-727-9200 or Fax 888-727-5704

- All work to meet the State Codes or reinspection fees will be charged for improper installations.
- The owner/contractor is responsible for making arrangements for the final inspection.