



LAKESIDE  
INSPECTIONS  
1-800-440-1621  
COMM 20.06 (a) 3.

**UNIFORM  
HEATING, VENTILATING, and AIR CONDITIONING  
APPLICATION**

UNIFORM PERMIT NO. \_\_\_\_\_

PARCEL NO. \_\_\_\_\_

PERMITS REQUIRED  CONSTRUCTION  PLUMBING  ELECTRICAL  OTHER

OWNERS NAME \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

CONTRACTORS NAME \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

PROJECT LOCATION \_\_\_\_\_  
BUILDING ADDRESS \_\_\_\_\_ SUBDIVISION \_\_\_\_\_ LOT NUMBER \_\_\_\_\_

EST. COST \_\_\_\_\_ CONTRACTORS LICENSE NO. \_\_\_\_\_

PROJECT DESCRIPTION \_\_\_\_\_ NEW CONSTRUCTION \_\_\_\_\_ ADDITION \_\_\_\_\_ REMODEL \_\_\_\_\_  
ONE AND TWO FAMILY \_\_\_\_\_ COMMERCIAL \_\_\_\_\_

**SCHEDULE OF WORK INVOLVED AND INSPECTION FEES**

**NEW BUILDING**

	EACH	COUNT	FEE
Base Fee _____	\$35.00	_____	_____
Plus _____	\$.03/Sq. Ft For All Areas	_____ Sq. Ft.	_____

**REPLACEMENT & MODIFICATIONS OF HEATING & AIR CONDITIONING EQUIPMENT & MISC. ITEMS**

	EACH	COUNT	FEE
Gas, oil, electric and coal furnace and boiler			
First 150,000 BTU	\$25.00	_____	_____
Amount over 150,000 BTU	\$3/50,000 BTU	_____	_____
Air Conditioning			
All Over 36,000 BTU	\$25.00	_____	_____
Fireplace and wood burning stove	\$25.00	_____	_____
Electric baseboard, wall unit and cabinet unit	\$1.25/KW	_____	_____
Duct work alteration	\$25.00	_____	_____
Other	\$25.00	_____	_____

Minimum Permit Fee \_\_\_\_\_ \$50.00

RE-INSPECTION FEE \_\_\_\_\_ \$25.00 EACH  
FAILURE TO CALL FOR INSPECTION \_\_\_\_\_ \$25.00 EACH  
DOUBLE PERMIT FEES WILL BE CHARGED IF WORK IS STARTED BEFORE PERMIT IS ISSUED

The applicant agrees to comply with the municipal ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability, expressed, or implied, of the department, municipality, or inspector; and certifies that the above information is accurate.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

**CONDITIONS OF APPROVAL** This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Have permit / application number and address when requesting inspections. Call 1-800-440-1621 for inspections. Give at least 48 hours notice on all inspections.

<b>FEES</b>	<b>ISSUING JURISDICTION</b>	<b>PERMIT ISSUED BY</b>
PLAN REVIEW _____	TOWN _____	NAME _____
INSPECTION FEE _____	VILLAGE _____	DATE _____
OTHER _____	CITY _____	CERT. NO _____
TOTAL _____	OF: _____	