



LICENSED CONTRACTOR HEATING PERMIT

Community Services Agency
Inspection Division
100 N. Jefferson St., Rm. 608
Green Bay, WI 54301
(920) 448-3300 - phone
(920) 448-3117 - FAX
inspmail@greenbaywi.gov

Address _____

Name of Contractor _____

Contractor's phone number: _____

Name of Owner _____

Owner's phone number _____ Unit Price _____ Date _____

Fuel Used: Gas _____ Electric _____ Oil _____ Remodeling Htg. Plt. _____

Air Cond. _____ Forced Air Furnace _____ Mfg. _____ B.T.U. Output _____

Boiler: Steam _____ Hot Water _____ Res. _____ Industrial _____ Comm. _____

Conversion: Oil _____ Gas _____ New _____ Existing _____ Building _____

Heater: Space _____ Unit _____ Class _____ License No. _____

Contractor's Signature: _____ Credential # _____

Area of new or add to: _____

Res. Bldg. _____ Square feet

Check box for Online Payment

The information below shall be provided for notification of project number and permit fee. This information is required to make payment online.

Phone _____ Fax _____ Email _____

This section for City use only
Project #: _____
Permit Fee: _____
Parcel #: _____
Receipt #: _____
Date: _____