

VILLAGE OF MOUNT PLEASANT 8811 Campus Dr., Mt. Pleasant, WI 53406

www.mtpleasantwi.gov

RADON SYSTEM PERMIT APPLICATION

262-664-7824 / 262-664-7825

buildinginspection@mtpleasantwi.gov

Permit#

**	ISCONSIN			•		
Proj	ect Address:					
Property Owner:			Owner Phone:			
□R	esidental 🗆 Commercial 🗆 Agricultural *Installer: 🗀 Contractor 🗀 Owner	<u> </u>				
*Installlation Contractor: Installer Email			l:			
DESC	RIPTION OF WORK:					
DESCI	RIPHON OF WORK.					
ITEMS			QTY	RATE	FEE	
1	Radon Reduction System			\$60/ea.		
	Fan Location ~ ☐ Exterior ☐ Attic ☐ Other					
	Intake Location ~ ☐ Sump Pump Cover ☐ Sub-slab ☐ Other					
	Electrical work such as a new branch circuit or modification of an existing circuit re	guires				
	an electrical permit. An electrical license is required as applicable**.	,				
	NIMUM PERMIT FEE \$60.00 TOTAL PERMIT FEE→		Fee Total: \$.00			
	RE-INSPECTION FEE \$30.00					
	Please Provide the Total Estimated Cost of the Installation Work→→			\$		
It is h	I ereby agreed between the undersigned and the Village of Mount Pleasant that for and in consideratior	of the perm	nit to be i	ssued		
_	ranted; that the installation as described above will be installed in compliance with applicable State of	WI Mechani	cal Codes	5		
as add	opted per ordinance and all applicable ordinances of the Village of Mount Pleasant.					

Date:

Applicant Signature:

^{*}If permit is pulled by the owner, then disregard the contractor portion (include an email address).

^{**}A license is not required for an owner/occupant of a 1 or 2 family dwelling to perform electrical work.