

OFFICE USE ONLY: Paid ____ / ____ / ____ by Cash Ck # _____ CC _____ Amt \$ _____ Sc QB

TOWN OF TRENTON
H.V.A.C.
PERMIT APPLICATION



Town of Trenton
1071 Highway 33E
West Bend, WI 53095

H.V.A.C.
PERMIT NUMBER

***** PLEASE NOTE THAT CONTACT PHONE NUMBERS FOR BOTH OWNER AND CONTRACTOR ARE REQUIRED*****

DATE _____ OWNER _____ PHONE _____

ADDRESS _____ EMAIL _____

PROJECT ADDRESS _____ TAX KEY: T11 _____

CONTRACTOR _____ ADDRESS _____

CONTACT _____ PHONE _____ EMAIL _____

LICENSE/CERTIFICATION # _____ EXPIRATION _____

Remarks: _____

If any work is commenced before a permit is obtained, all of the below fees shall be doubled.

I acknowledge that I am fully aware of the implications of all requirements, and will abide by all codes relating to this project:

Signature: _____ Date: _____

Sq ft of living area		
Heating Including Duct Work	_____	@ \$0.03 per sq ft \$ _____
Air Conditioning	_____	@ \$0.03 per sq ft \$ _____
Other Items		
	Number	
Natural Gas Service	_____	@ \$32.00 \$ _____
Incinerator Unit	_____	@ \$38.00 \$ _____
Natural Fireplace	_____	@ \$38.00 \$ _____
Air Conditioning Unit	_____	@ \$38.00 \$ _____
Furnace Unit	_____	@ \$38.00 \$ _____
Gas Fireplace	_____	@ \$20.00 \$ _____
Heating	_____	@ \$20.00 \$ _____
Radiant Heating Unit	_____	@ \$20.00 \$ _____
SUBTOTAL OF ITEM CHARGES		\$ _____
ADD: BASE FEE ALL PERMITS		\$ 50.00
TOTAL AMOUNT ENCLOSED:		\$ _____