

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: \$ _____