



Inspection & Zoning Department

W194 N16660 Eagle Drive, Jackson, WI 53037

www.villageofjacksonwi.gov

P: 262.677.9696

HVAC PERMIT APPLICATION

Permit #: _____ - _____

PROJECT ADDRESS: _____ Suite/Unit #: _____

Owner Name: _____ Phone: (____) _____ - _____

Contractor Name: _____ Phone: (____) _____ - _____

Address: _____ City: _____

State: _____ Zip: _____ Email: _____

WI HVAC Contractor #: _____ Exp.: _____

1) Project Type:

- | | | | |
|--|---------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> 1 or 2 Family | <input type="checkbox"/> Multi-Family | <input type="checkbox"/> Commercial | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> New | <input type="checkbox"/> Replacement | <input type="checkbox"/> Additional | <input type="checkbox"/> Ductwork |

2) Type of Equipment Being Installed:

- | | | | |
|------------------------------------|------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Furnace | <input type="checkbox"/> Boiler | <input type="checkbox"/> Air Conditioner | <input type="checkbox"/> RTU |
| <input type="checkbox"/> Fireplace | <input type="checkbox"/> Wall Unit | <input type="checkbox"/> Air Handler/HRU | <input type="checkbox"/> Other: _____ |

Total BTU's: _____ Total Cooling Tons: _____

3) Fuel Source:

- | | | | |
|--------------------------------------|-----------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Fuel Oil | <input type="checkbox"/> Electric | <input type="checkbox"/> Solid Fuel / Other |
|--------------------------------------|-----------------------------------|-----------------------------------|---|

4) Method of Exhaust:

- | | | | |
|--|--------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> Direct Vent (PVC) | <input type="checkbox"/> "B" Vent | <input type="checkbox"/> "A" Vent | <input type="checkbox"/> Factory Built |
| <input type="checkbox"/> Chimney (Masonry) | <input type="checkbox"/> Other _____ | | |

	Description	QTY.	Rate of Fee	Amount
A.	Heating up to 150,000 BTU input		\$60.00 per unit	
B.	Each additional 50,000 BTU		\$16.00 per 50,000	
C.	Fireplace / Woodstove / Incinerator		\$60.00 per unit	
D.	Air to Air Heat Recovery Unit		\$60.00 per unit	
E.	AC Residential		\$60.00 per unit	
F.	AC Commercial (Up to Three Ton Unit)		\$60.00 per unit	
G.	\$18.00 per ton of cooling over 3 tons		\$750 max.	
H.	Commercial Exhaust Hoods and Systems		\$150.00 per system	
I.	Duct Work (Includes New and Alterations)		\$60.00 per system	
J.	Gas Supply Piping (New, Repair, Extend)		\$60.00 per system	
K.	Failure to Call for Inspection		\$75.00 per inspection	
L.	Failure to Obtain Permit Prior to Start		DOUBLE of All Fees	
SUBTOTAL				
TOTAL PERMIT FEE			MINIMUM FEE \$60.00	

Applicant Signature: _____ Date: _____

By signing above, applicant hereby agrees to comply with the applicable requirements of the State of WI DSPS Codes and the Village of Jackson Code of Ordinances and with all conditions applicable to permit issuance. Applicant further understands that the issuance of this permit creates no legal liability, expressed or implied, by the Municipality. Applicant certifies that all information for which this permit has been issued is true and accurate.

For Office Use Only	
Amount:	\$ _____
Date Received:	_____
Payment Type:	CH / CASH / CC
Check/Rcpt. #:	_____
Received By:	_____