

H.V.A.C Permit Application

Town of Lyndon, Sheboygan County
 W6081 CTH N, Plymouth, WI 53073
 p - 920-528-7255

\$40

Permit # _____
 Amount Pd \$ _____
 Check # _____

The Undersigned hereby applies for a permit to install heating, ventilation or air conditioning equipment as hereinafter described.

DATE	
Owner's Name	Owner's Phone
Project Address	
City	Zip
Project Cost	Parcel # 59010-
Contractor	Contractor Phone
Contractor Address, City, State, Zip	Contractor Certificate #

Type of Building or Structure:

<input type="checkbox"/>	Residential
<input type="checkbox"/>	Commercial
<input type="checkbox"/>	Industrial

Type of Installation:

<input type="checkbox"/> Boiler	<input type="checkbox"/> Fireplace or woodburner
<input type="checkbox"/> Furnace	<input type="checkbox"/> Replacement of Equipment
<input type="checkbox"/> Unit Heater(s)	<input type="checkbox"/> Air Conditioning
<input type="checkbox"/> Rooftop Unit(s)	<input type="checkbox"/> Ventilation
<input type="checkbox"/> Addition to Existing	<input type="checkbox"/> Other: _____

Type of fuel: _____

Calculated BTU heat loss: _____

BTU Rating: Input _____ Output _____

Comments: _____

The undersigned certifies that all of the above information is correct, and applies for a permit to do the work above described and hereby agrees that such work will be done in accordance with the descriptions set forth herein; and it is further agreed that such work will be done in strict compliance with the State Heating and Ventilating Code of Wisconsin; and the undersigned agrees to obey any and all lawful orders of the HVAC Inspector of the Town of Lyndon.

 Contractor or Agent Date