

**HVAC PERMIT**

For Inspections Call: Ken Robers

414-423-2100 ext. 3107

Tax Key: \_\_\_\_\_

<p align="center"><b>VILLAGE OF HALES CORNERS</b>          5635 S. New Berlin Road          Hales Corners, WI 53130          P:(414) 529-6160          www.halescorners.org</p>
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<p>Permit No. _____</p> <p>Permit expires <b>18 months</b> from issue date.</p>
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Job Address:	HVAC Contractor:
Tenants Name/ Phone No:	HVAC Email:
Owner's Name:	Address:
Owner's Phone No:	City/State/zip:

Explanation and Area(s) of Work: \_\_\_\_\_

ITEM	QTY.	FEE	TOTAL
Heating, Incinerator Units, Wood Burning Appliances, Energy Recovery Ventilators, Heat Pumps & Split HVAC Units \$50.00 per unit up to & including 150,000 BTU units + \$17.00/50,000 BTU or fraction thereof, maximum \$800.00/unit		\$50.00/unit + \$17.00/50,000 BTU  TOTAL BTU'S _____	
Commercial/Industrial Exhaust Hoods & Exhaust Systems		\$170.00/unit	
Heating & Air Conditioning Distribution Systems		\$1.90/100 sf of conditioned, \$50.00 minimum	
Air Conditioning, Heat Pumps & Split HVAC Units \$50.00/unit up to 3 tons or 36,000 BTU's + \$17/each ton or 12,000 BTU's or fraction thereof, maximum \$800.00/unit		\$50.00/unit + \$17.00/12,000 BTU	
Re-Inspection Fee		\$50.00	
Work done without a permit		Double Fees	
<b>Minimum Permit Fee</b>	<b>\$50.00</b>	<b>TOTAL</b>	

Total Combined maximum Heat Input \_\_\_\_\_ BTU/HR

Will this work require the services of an electrician?  Yes  No

If yes, name/phone # of electrical contractor \_\_\_\_\_

Will this work require the services of a plumber? (**Backflow Preventer**)  Yes  No

If yes, name/phone # of plumbing contractor \_\_\_\_\_

It is agreed and understood that all work shall be done in accordance with all applicable codes of the State of Wisconsin and the Ordinances of the Village of Hales Corners.

It is hereby agreed between the undersigned and the Village of Hales Corners that all work performed as herein described shall be completed in strict compliance with the Village of Hales Corners Municipal Code and all laws of the State of Wisconsin relating to such work. Furthermore, by signing this application, or by authorizing an agent to sign this application, the owner/tenant acknowledges that an inspection or inspections of the work herein described are required and consents to the entry onto the subject property by an employee of the Village of Hales Corners to perform all necessary inspections. Said inspection(s) shall only be made at reasonable times and by appointment or notice.

_____	_____	_____	_____
HVAC Contractor's Signature	Date	Municipal Agent	Date
(R: 02/29/2024)			