



# APPLICATION FOR HVAC PERMIT

Village of White Lake  
615 School St; PO Box 8, White Lake, WI 54491  
PHONE: 715-882-8501  
Email: [Clerk@vi.whitelake.wi.gov](mailto:Clerk@vi.whitelake.wi.gov)

ALL INFORMATION MUST BE PRINTED AND LEGIBLE

**PROJECT LOCATION:** \_\_\_\_\_

**PROJECT TYPE AND FEES:** (MINIMUM \$40 FEE)

**NEW** (\$0.08 per sq. ft.)     **REMODEL** (\$0.08 per sq. ft.)     **ADDITION** (\$0.08 per sq. ft.)  
 **OTHER** \_\_\_\_\_

**PROJECT DESCRIPTION :** \_\_\_\_\_

**PROJECT COST :** \$ \_\_\_\_\_    **SQ. FOOTAGE OF PROJECT :** \_\_\_\_\_

**OWNER'S INFORMATION:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE#: \_\_\_\_\_

**CONTRACTOR'S INFORMATION:**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE#: \_\_\_\_\_

CONTRACTOR CREDENTIAL # \_\_\_\_\_ QUALIFIER # \_\_\_\_\_

**CALL FOR INSPECTION: 715-882-8501**

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
INSPECTOR SIGNATURE

\_\_\_\_\_  
DATE