P O Box 1130
Oshkosh, WI 54903-1130
Phone: (920) 236-5050
www.ci.oshkosh.wi.us

Heating &A/C Permit Application

Project Address	
Applicant	☐Owner ☐Contractor ☐Tenant ☐Other (describe)
Owner / Tenant	Name Phone Address E-mail
Contractor	Company Name Phone Contact E-mail Address State Credential #'s HVAC Contractor Lic #
Type of Work	☐Heating ☐Air Conditioning ☐Both
Use	☐Residential ☐Commercial
Chimney Type	☐B-Vent ☐Direct Vent ☐Existing Masonry ☐Lined Masonry ☐Single Wall
Appliance Type	☐Air Conditioner ☐Air Handler ☐Elec Unit Heater ☐Gas Boiler ☐Gas Furnace ☐Gas Unit Heater ☐Oil Boiler ☐Oil Furnace ☐Roof Top Unit ☐Other
Project Description ****Include the # of appliances and BTUs for each appliance****	
Value of Job	**$** (Value for materials & labor is req. to ensure consistency in accessing permit fees for all applicants.) Payment by: ☐ Check # ☐ Cash ☐ Credit/Debit Card (office or online only)

I certify the above information is complete and accurate. Any deviations from the above submitted information may require additional permits to be obtained. I acknowledge and agree to these terms.

Name: Date: