

Village of Westchester

10300 West Roosevelt Road, Westchester, IL 60154 Phone: (708) 345-0199 ● Email: <u>Building@westchester-il.gov</u>

APPLICATION FOR RESIDENTIAL HVAC PERMIT

Date Received

Date	e:	Site Address:		
Name of	Property Owner:	Pho	ne:	
Address:	:		Email:	
Contractor:		Pl	none:	
Contractor Address:			Email:	
Descripti	ion of work:			
Cost of v	vork:			
		DESCRIPTION OF WORK		
Replacement Permit Fees:	Furnace Replacement: \$3	150	□ Boiler	
	Air Conditioner Replacen Air Conditioner Replacen Boiler: \$225	•		
Inspection Fed	e: One inspection included	Any other inspections require a	\$50 payment.	
relieve the applicar	nt from constructing the work in any c	ther manner than that provided for in the Ord	proved by the Building Commissioner or not, shall permit to inance of this Village relating thereto. The Applicant having ade are true to the best of my knowledge and belief.	
Signature:		Date	:	
Print Name: _				
Application Re	equirements: cation Form: Fill out a copy o	of this application form.		

Code Specifications:

- Furnace: Combustion air source & size shall be provided.
- Air Conditioning: Disconnect must be a minimum of 24 inches above ground.
- Location: Remote compressor-condenser unit must be at least 15 feet away from adjacent residence.

Provide a signed contract with detail scope of work (all vendors must be registered prior to permit release)

INSPECTIONS: You must contact the Building Department (708-345-0199) and schedule the necessary inspections.

A final inspection is required.

Energy Efficiency Rating of Device

Provide manufacture spec sheet for device