



COUNTY OF TAZEWELL
DEPARTMENT OF COMMUNITY DEVELOPMENT

11 South 4th Street, Room 400, Pekin, Illinois 61554

Phone: (309) 477-2235 Fax: (309) 477-2358 Email: zoning@tazewell.com

Kristal Deininger, Community Development Administrator

APPLICATION FOR HEATING/VENTILATION & AIR CONDITIONING PERMIT

PERMIT # \_\_\_\_\_ - HV

ACCA Manual J calculation (www.acca.org) [ ] submitted [ ] approved \_\_\_\_/\_\_\_\_/20\_\_

Other approved heating & cooling calculation [ ] submitted [ ] approved \_\_\_\_/\_\_\_\_/20\_\_

Address of Job \_\_\_\_\_ Parcel ID# \_\_\_\_\_

Owner/Tenant \_\_\_\_\_ Phone # \_\_\_\_\_

Owner/Tenant Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone # \_\_\_\_\_

Contractor Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Residential:

Single Family [ ] Two Family [ ]

New [ ] Existing [ ]

Number of Heating Units \_\_\_\_\_

Number of AC Units \_\_\_\_\_

Number of Geothermal Units \_\_\_\_\_

Commercial:

New [ ] Existing [ ]

Sq. Feet of Heating \_\_\_\_\_

Sq. Feet of AC \_\_\_\_\_

Total BTU Input Heat \_\_\_\_\_

Total BTU Input AC \_\_\_\_\_

Type of System: \_\_\_\_\_

Type of Flue: \_\_\_\_\_

Notes: \_\_\_\_\_

The undersigned does hereby agree to install above noted work in compliance with the laws of the State of Illinois and with the code of Tazewell County. The inspector will make all required inspections. It is the sole responsibility of the permit holder to call the inspector and make arrangements for required inspections.

I understand that this permit is for only the undersigned party and is non-transferable. If a change in the contractor is needed, a new permit must be issued and charged a base fee. Any changes to the scope of work will be subject to additional fees. All stand alone permits will expire 180 days from the date of issuance.

Signature: \_\_\_\_\_ Date \_\_\_\_\_
Contractor [ ] Owner [ ]

Fee Total \$ \_\_\_\_\_

Building Permit # \_\_\_\_\_