



Town of Astatula

Mechanical System Change Outs

Permit: _____

Date: _____

Job Address: _____

Detailed scope of work:

Structure Type : Single-Family Residence/Townhouse/Condo Manufactured home Other _____

Energy source: Gas Electric Solar Other _____

Duct

Relocate/Replacement only – no square footage increase (no additional information is required)

Full System Change Out

Condenser and air handler/furnace

Unit size(s) remains the same

Single-package unit

Change in unit size(s)

Additions

New mini-split system

New additional system

Using existing system, square footage increase

Partial System Change Page 2 must ALSO be filled-out only on Partial system change outs.

Required information for all work

Condenser information: Manufacturer: _____ Model Number: _____

Circuit breaker size required: _____ Wire size required: _____ () Existing or () Upgraded

Air Handler/Packaged System: Manufacturer: _____ Model number: _____

Circuit breaker size required: _____ Wire size required: _____ () Existing or () Upgraded

Heat strip size: _____ Additional info: _____

Note : If gas heat, pipe size and shut-off valves shall be to current requirements: () Existing or () Upgraded

Electrical work other than unit to disconnect will require a Licensed Electrical Contractor.

Prepared by (Print Name): _____ License #: _____

License Holder's Signature: _____ Date: _____

*** Note: This completed form is required on site at time of inspection. The form will be taken to office for record keeping after inspection ***



Office of Building Services

Partial Mechanical System Change Outs

**This page is only required for Partial systems change outs in
Addition to the required First page**

Florida Statutes, Section 553.912, Air Conditioners. It is the intent of the legislature that all replacement air-conditioning systems be installed using energy-saving, quality installation procedures; including, but not limited to, equipment sizing analysis and duct inspection.

Per FBC-EC 101.4.7 exceptions Outdoor and indoor units that are not designed to operate together must meet U. S. Department of Energy Section C403.2.3 (commercial) or R303.1.2 (residential) requirements. Matched systems are required and must be verified by one of the following means: ARI (AHRI) data, accredited labs, manufacture's letter, letter from a Florida Registered Professional Engineer.

- Installing either the air handler or condenser (provide documentation):
The replacement unit you are installing is certified for capacity and efficiency by (check one):
- ARI Rating
 - ARL or other recognized testing laboratory
 - Professional Engineer, Florida registration number: _____
 - Manufacturer's letter

Please complete HVAC Matching Equipment Certification and provide all the required support data proving this is a matched system. This information must be provided with the permit application. Note a copy of all information submitted must be on site for a final inspection. Missing forms or information will result in a failed inspection. This form is a required part of all mechanical permit applications for system replacement, addition or repair. Permits may not be processed without all supporting documents.

Prepared by (Print Name): _____ License #: _____

License Holder's Signature: _____ Date: _____

*** Note: This completed form is required on site at time of inspection. The form will be taken to office for record keeping after inspection ***