

**CITY OF HOMESTEAD
DEVELOPMENT SERVICES**
PERMITTING HOURS
8:00 A.M. - 12:00 P.M.
MONDAY – FRIDAY



100 CIVIC COURT
HOMESTEAD FLORIDA 33030
T.305.224.4500 F.305.224.4539

AIR CONDITIONING CHANGE OUT EQUIPMENT DATA

Two (2) copies of this form must accompany all air conditioning change outs permit applications.

APPLICANT MUST PROVIDE ONE OF THE FOLLOWING TO SHOW COMPLIANCE WITH FBC WIND DESIGN REQUIREMENTS:

- 1. MDC NOA OR STATE PRODUCT APPROVAL FOR THE EQUIPMENT; 2. MANUFACTURER’S SPECIFICATIONS LISTING COMPLIANCE WITH FBC WIND DESIGN REQUIREMENTS OR 3. SIGNED AND SEALED ENGINEERING FOR THE UNIT.**

Contractor: _____ Phone #: _____

Site address: _____ Unit/Apt #: _____ Permit # _____

EQUIPMENT DATA	EXISTING UNIT (Must provide system size or provide load calculations)	NEW UNIT
MANUFACTURER		
PKG. UNIT MODEL #		
AUH/COIL MODEL #		
CONDENSER MODEL #		
HEATER KW		
SYSTEM SIZE (TONS)		
SEER		

A.H. R.I Reference Number: _____

Is a new roof curb/curb adapter or stand needed? Yes _____ No _____

Is new equipment being moved or relocated? Yes _____ No _____

Is new ductwork being installed/removed? Yes _____ No _____

Is an air duct smoke detector installed? Yes _____ No _____

CONTRACTOR SIGNATURE: _____ Date: _____

FLORIDA STATE CERTIFICATION/REGISTRATION #: _____

*****This form must be posted at the jobsite for inspection*****

WWW.CITYOFHOMESTEAD.COM