



A/C Change-Out Permit Instructions

- The Permit application must be completely filled out signed and notarized
- Two (2) original sets of the attached required forms with AhRi's
- Notice of Commencement if over \$7,500 in value
- Licensing and insurance for the contractor (State License, Business Tax Receipt, Liability and Workers Compensation and/or Exemption) (Insurance Certificate must show the Town of Southwest Ranches as the certificate holder).

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Select One Trade: Building Electrical Plumbing Mechanical Other _____

Application Number: _____ Application Date: _____

1	Job Address: _____	Unit: _____	City: _____
	Tax Folio No.: _____	Flood Zn: _____	BFE: _____
	Building Use: _____	Construction Type: _____	Job Value: _____
	Present Use: _____	Proposed Used: _____	Occupancy Group: _____
	Description of Work:		
	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision <input type="checkbox"/> Other: _____		
	Legal Description: _____ <input type="checkbox"/> Attachment		

2	Property Owner: _____	Phone: _____	Email: _____
	Owner's Address: _____	City: _____	State: _____ Zip: _____

3	Contracting Co.: _____	Phone: _____	Email: _____
	Company Address: _____	City: _____	State: _____ Zip: _____
	Qualifier's Name: _____	Owner-Builder: <input type="checkbox"/>	License Number: _____

4	Architect/Engineer's Name: _____	Phone: _____	Email: _____
	Architect/Engineer's Address: _____	City: _____	State: _____ Zip: _____
	Bonding Company: _____		
	Bonding Company Address: _____	City: _____	State: _____ Zip: _____
	Fee Simple Titleholder's name (if other than owner): _____		
	Fee Simple Titleholder's Address (if other than owner): _____	City: _____	State: _____ Zip: _____
	Mortgage Lender's Name: _____		
	Mortgage Lender's Address: _____	City: _____	State: _____ Zip: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

X _____
Signature of Property Owner or Agent

X _____
Signature of Qualifier

STATE OF _____
COUNTY OF _____

STATE OF _____
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

(Type / Print Property Owner or Agent Name)

(Type / Print Qualifier's Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature

NOTARY'S SIGNATURE as to Qualifier's Signature

Notary Name _____
(Print, Type or Stamp Notary's Name)

Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____

Type of Identification Produced _____

APPROVED BY: _____ Permit Officer Issue Date: _____ Code in Effect: _____

A jurisdiction may use a supplemental page requesting additional information and citing other conditions, please inquire.
Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.

Town of Southwest Ranches
3265 Meridian Parkway Suite 100
Weston Florida 33331
954 888-9882 Office
954888-9860 fax

Air Conditioning Change out Affidavit

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: _____ Model# _____ **Condenser:** Mfg _____ Model# _____
Volts _____ CFM's _____ Heat Strip _____ Kw Volts _____ SEER/EER _____ BTU's _____
Min. Circuit Amps _____ Wire gauge _____ Min. Circuit Amps _____ Wire gauge _____
Max. Breaker size _____ Min. Breaker size _____ Max. Breaker size _____ Min. Breaker size _____
Ref. line size: Liquid _____ Suction _____ Ref. line size: Liquid _____ Suction _____
Refrigerant type _____ Refrigerant type _____
Location: Existing _____ New _____ Location: Existing _____ New _____
Attic/Garage/Closet (specify) _____ Left/Right/Rear/Front/Roof _____
Access: _____ Condensate Location _____

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: _____ Model# _____ **Condenser:** Mfg _____ Model# _____
Volts _____ CFM's _____ Heat Strip _____ Kw Volts _____ SEER/EER _____ BTU's _____
Min. Circuit Amps _____ Wire gauge _____ Min. Circuit Amps _____ Wire gauge _____
Max. Breaker size _____ Min. Breaker size _____ Max. Breaker size _____ Min. Breaker size _____
Ref. line size: Liquid _____ Suction _____ Ref. line size: Liquid _____ Suction _____
Refrigerant type _____ Refrigerant type _____
Location: Ext. _____ New _____ Location: Ext. _____ New _____
Attic/Garage/Closet (specify) _____ Left/Right/Rear/Front/Roof _____
Access: _____ Condensate Location _____

Certification: I hereby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC – R (N) 1107 & 1108

Signature

Date