



Building Department
4501 N Ocean Drive
Lauderdale-By-The-Sea, FL 33308
954-640-4215

AC CHANGE OUT APPLICATION

Submission Requirements:
(Must submit two of each document)

- COMPLETE BUILDING PERMIT APPLICATION SIGNED AND NOTARIZED
- DOCUMENTED PROOF OF COST
- PLANS SHOWING LOCATION OF UNIT
- PRODUCT APPROVAL HIGHLIGHTED
- AHRA CERTIFICATE AND MOUNTING DETAIL OF OUTSIDE EQUIPMENT
REQUIRED FOR ALL CHANGE OUTS
- AC DATA REPLACEMENT FORM

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Select One Trade: Building Electrical Plumbing Mechanical Other _____

Application Number: _____

Application Date: _____

Job Address: _____	Unit: _____	City: _____
Tax Folio No.: _____	Flood Zn: _____	BFE: _____
Building Use: _____	Construction Type: _____	Job Value: _____
Occupancy Group: _____	Present Use: _____	Proposed Used: _____
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

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

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

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.

PERMIT AFFIDAVIT

FOR ACKNOWLEDGEMENT OF COMPLIANCE WITH RESTRICTNE DEEDS AND COVENANTS

STATE OF FLORIDA:

BROWARD COUNTY:

On this day personally appeared before me, the undersigned officer duly authorized to administer oaths and take acknowledgments _____, who being by

(HOMEOWNER)

sworn, deposes and says:

By my signature below, I acknowledge that the legal description for the property which I am applying for a permit is _____

LOT

BLOCK

SUBDIVISION

aka _____

STREET ADDRESS

1. That I am the legal owner of the property
2. I acknowledge that approval may be required from the following

HOMEOWNERS ASSOCIATION

Which entities or associations regulate or otherwise govern the community, neighborhood, or development my property is located.

3. I further acknowledge that I am responsible for any additional cost that may be assessed by the Town of Lauderdale By The Sea and/or the entity regulating or governing the subject property as a result of my not having obtained the necessary approvals from any entity or association that may regulate or otherwise govern the community neighborhood, development in which my property is located.

FURTHER AFFIANT SAYETH NAUGHT

Date: _____

Owner's Signature: _____

Owner's Printed Name: _____

STATE OF FLORIDA

COUNTY OF BROWARD

Affirmed and signed before me on _____ the forgoing was acknowledge before me affiant, _____, who personally appeared before me at the time of notarization, who signed and acknowledged signing the forgoing document, who did take an oath, and

Who is personally known to me _____ or

Who produced the following identification _____

Notary Public Commission Expiration Date: _____

(Printed or Typed Name)

Subject: "Broward County Uniform Data Form for Residential and Light Commercial Air Conditioning Replacements"

POLICY

Each permit application for a residential and light commercial air conditioning replacements, shall be submitted to all jurisdictions in Broward County using the attached "*Broward County Uniform Data Form for Residential and Light Commercial Air Conditioning Replacements*".

This form does not relieve the permit holder, building owner or contractor from complying with all and any applicable local regulations or ordinances related to zoning, flood prevention, fire prevention, etc.; or prohibits a Broward County jurisdiction from requiring additional information to be provided in relation to applicable local regulations or ordinances related to zoning, flood prevention, fire prevention, etc.

Use of the "*Broward County Uniform Data Form for Residential and Light Commercial Air Conditioning Replacements*" is mandatory countywide starting October 1, 2019.

See attached form.

Editor's note: This form was updated by vote of the Board of Rules and Appeals on November 14, 2019 and remains mandatory county-wide.

Broward County Uniform Data Form for Residential and Light Commercial Air Conditioning Replacements

(All others, including cooling towers, chillers, refrigeration units, etc. must provide plans.)

EACH SYSTEM REQUIRES A FORM

Job Name							
Address							
Unit #		City		FL	Zip Code		

FILL IN APPLICABLE INFORMATION

Data	Existing Unit (1)	New Unit
Manufacturer		
Size (Tons) / SEER (2) / EER (2)		
Package/Heat Pump Model #		
Condensing Unit Model #		
AHU Model #		
Model #		
KW Strip Heat		

Minimum Circuit Amp	c/u		ahu/pkg		c/u		ahu/pkg	
Maximum Overcurrent Protection	c/u		ahu/pkg		c/u		ahu/pkg	
Size of Disconnect	c/u		ahu/pkg		c/u		ahu/pkg	

(1) Provide equipment sizing calculations if existing unit data is not available (ACCA Manual N, J, etc.)

(2) Provide AHRI Certificate

Will a new stand, curb or curb adapter be installed?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Will a duct smoke detector be installed or reconnected?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Is the duct s/d connected to an Fire Alarm Panel?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Will the A/C location be the same?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

Company Name	
FL State or Co. License #	
Qualifier's Signature	

FOR BUILDING DEPARTMENT USE ONLY

Process or Permit #		Jurisdiction	
Approved by		Date	

Disclaimer:

1. This form does not relieve the applicant from compliance with all applicable sections of the Florida Building Codes.
2. Additional local regulations might be applicable, i.e. zoning, flood and fire prevention, etc.