



TOWN OF PONCE INLET / PLANNING & DEVELOPMENT DEPARTMENT
APPLICANT PERMIT PACKAGE
MECHANICAL SYSTEM REPLACEMENT

JOB ADDRESS: _____

CONTRACTOR: _____ **PERMIT #** _____

Please note that a \$25.00 permit processing fee is due at time of submittal

- COMPLETE APPLICATION FORM - **Complete description** of work to be performed, including make & model of system, SEER rating and size of system; must be signed & notarized by license holder and property owner
- Agent Authorization form signed by Property Owner giving Contractor authorization to apply for permit. If HOA or Corp., a copy of the By-Laws and current board members giving authority to sign **must** be submitted with permit application
- PROOF OF INSURANCE - A copy of the current Comp Card from Volusia County or current State License, Liability Insurance and Worker's Comp Insurance or Exemption for General Contractor and all Sub-Contractors must be provided.
- NOTICE OF COMMENCEMENT AFFIDAVIT N/A
- AHRI MANUFACTURER SHEET (2 sets)
Letter from Manufacturer will be required for single change out if not AHRI is available
- TIE DOWN CLIPS: FL Product Approval Number written on Permit Application.

Note: *The checklist is a guide for your convenience; however, additional items may be required to process your permit application. If you require additional information, please call our office at 386-236-2182.*

2010 FBC RESIDENTIAL:

M1307.1 General - Installation of *appliances* shall conform to the conditions of their *listing* and *label* and the manufacturer's installation instructions. The manufacturer's operating and installation instructions shall remain attached to the *appliance*.

M1307.2 Anchorage of appliances. – Appliances designed to be fixed in position shall be fastened or anchored in an approved manner. In Seismic Design Categories D1 and D2, water heaters shall be anchored or strapped to resist horizontal displacement caused by earthquake motion. Strapping shall be at points within the upper one-third and lower one-third of the appliance's vertical dimensions. At the lower point, the strapping shall maintain a minimum distance of 4 inches (102mm) above the controls.

ELECTRICAL WORK: 489.105 Definitions. (i) "Mechanical contractor" - If electrical work and/or changes beyond the scope allowed for mechanical contractors should be necessary, please notify the Ponce Inlet Building Department to add the electrical work to the Mechanical Permit **prior to an inspection**. A Base Electrical Fee of \$40.00 will be charged. **Failure to notify and follow this procedure will subject the property owner to pay a penalty fee of \$200.00 for un-permitted electrical work.** If the Electrical Contractor wishes to obtain a separate permit, all appropriate permit fees will be charged.

I have read and understand the requirements for submitting and obtaining a Mechanical permit:

- _____ Safety Caps **Must** be installed
- _____ Must use correct tie down clips per engineering provided on permit application.

Note: Single Unit change outs will still **require** inspections of inside and outside units

Contractor's signature

Date

SECTION 7: COMPLIANCE WITH FLORIDA BUILDING CODE – BUILDING DIVISION	
Check all that apply for this permit	
Commercial [] Residential [] New [] Addition [] Alteration [] Repair [] Demolition []	
Building [] Electrical [] Gas [] Mechanical [] Plumbing [] Roofing [] Dock [] Pavers []	
Boathouse [] Boat Slip [] Pier [] Mooring Poles [] Driveway [] Shed [] Other []	
SECTION 7: ELECTRICAL	SECTION 8: PLUMBING
Company:	Company:
License Number	License Number:
Phone:	Phone:
Existing service AMP size:	Number of fixtures replaced?
New service AMP size:	Number of new fixtures?
Remodel: Number of circuits added	Check one: City Sewer [] } Septic System []
Remodel: Number of fixtures added	
Total Cost for this work: \$	Total Cost for this work: \$
SECTION 9: MECHANICAL	SECTION 10: ROOFING
Company:	Company:
License Number	License Number
Phone:	Phone:
Check one: New [] Replacement []	Type of material:
Total cost for this work: \$	Total cost of this work: \$
SECTION 11: GAS	SECTION 12: ADDITIONAL TRADE
Company:	Company:
License Number	License Number
Phone:	Phone:
Check one: New [] Replacement []	Type of Work?

Application is hereby made to obtain a Development/Construction Permit from the Planning & Development Department of the Town of Ponce Inlet, Florida to perform the type of work indicated herein. I certify that no work or installation has commenced **PRIOR** to the issuance of the requested Permit and, if so, then I will pay **additional fees per the Town regulations**. I further certify that all work will be performed to meet all applicable laws, rules and codes regulating construction and development in this jurisdiction. I understand that a separate Permit must be secured before any work for building, electrical, mechanical, plumbing, excavation & grading, sign installation, soil erosion control, tree removal, wells, pools, accessory buildings, seawalls & docks, or any other land disturbance activities. **Owner's Affidavit: I certify that all the foregoing information is accurate and all work will be done in compliance with all of the applicable laws, rules and codes regulating zoning and construction in Ponce Inlet, Florida.**

WARNING TO OWNER: Your failure to record a Notice of Commencement (NOC) may result in your being required to pay DOUBLE fees for improvements to your property. If you intend to obtain financing, please consult your lender or attorney before recording your NOC.

STATE OF FLORIDA

COUNTY OF VOLUSIA

TOWN OF PONCE INLET

Signature of Owner (required)

Signature of Contractor

Subscribed and sworn to (or affirmed) before me on _____, 20__ by _____. He / She is personally known to me or has presented _____ as identification.	SEAL / STAMP Notary Signature: _____
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Application Approved By: _____, Building Official Date: ___/___/___

Approved by: _____, Fire Marshal Date: ___/___/___

Additional Conditions Attached

**TOWN OF PONCE INLET
BUILDING INSPECTION DEPARTMENT
386-236-2182**

MECHANICAL REPLACEMENT OF EXISTING SYSTEMS PERMIT # _____

In order to clarify this department's guideline with regard to inspections for compliance the following list has been created to aid the contractor.

Mechanical:

Inside Air Handler Unit

Correct Unit Installed Properly
Return and Supply Duct & Connections Proper
Primary Condensate Line indoor: Properly Installed and Trapped
Secondary Condensate Line or Condensate Cutoff Device
Duct Certification on Unit at time of inspection

Electrical:

Disconnect Present and Proper: Note: Replacement will require an electrical Permit
Correct Breaker Size

Mechanical:

Outdoor Condenser Unit:

Correct Unit Installed Properly
Clip Attachments to Slab or Stand Correct per manufacture and/or Florida Approval
Condensate Line Outdoors: Properly Installed and Trapped
Freon Locking Caps
Roof top units must be identified

Electrical:

Disconnect Present and Proper: Note: Replacement will require an electrical Permit
Correct Breaker Size

FBC Residential: Chapter 13 General Mechanical System Requirements & 14 Heating And Cooling Equipment

M1307.1 General. Installation of *appliances* shall conform to the conditions of their *listing* and *label* and the manufacturer's installation instructions. The manufacturer's operating and installation instructions shall remain attached to the *appliance*.

M1307.2 Anchorage of appliances. – Appliances designed to be fixed in position shall be fastened or anchored in an approved manner. In Seismic Design Categories D1 and D2, water heaters shall be anchored or strapped to resist horizontal displacement caused by earthquake motion. Strapping shall be at points within the upper one-third and lower one-third of the appliance's vertical dimensions. At the lower point, the strapping shall maintain a minimum distance of 4 inches (102mm) above the controls.

M1411.6 Locking access port caps. Refrigerant circuit access ports located outdoors shall be fitted with locking-type tamper-resistant caps.

M1411.3 Condensate disposal. Condensate from all cooling coils or evaporators shall be conveyed from the drain pan outlet to an *approved* place of disposal. Such piping shall maintain a minimum horizontal slope in the direction of discharge of not less than $\frac{1}{8}$ unit vertical in 12 units horizontal (1-percent slope). Condensate shall not discharge into a street, alley or other areas where it would cause a nuisance.

2014 5th Edition Florida Building Code: Mechanical

304.1 General. *Equipment* and appliances shall be installed as required by the terms of their approval, in accordance with the conditions of the listing, the manufacturer's installation instructions and this code. Manufacturer's installation instructions shall be available on the job site at the time of inspection.

307.2.1 Condensate disposal. Condensate from all cooling coils and evaporators shall be conveyed from the drain pan outlet to an *approved* place of disposal. Such piping shall maintain a minimum horizontal slope in the direction of discharge of not less than one-eighth unit vertical in 12 units horizontal (1-percent slope). Condensate shall not discharge into a street, alley or other areas so as to cause a nuisance.

307.2.4 Traps. Condensate drains shall be trapped as required by the *equipment* or *appliance* manufacturer.

**TOWN OF PONCE INLET
BUILDING INSPECTION DEPARTMENT
386-236-2188
REQUIRED INSPECTIONS
Mechanical System Replacement**

Indoor Air Handler Unit

Correct Unit Installed Properly Yes No Describe _____

Return and Supply Proper
 Yes No Describe _____

Primary Condensate Line Proper
 Yes No Describe _____

Secondary Condensate Line Proper
 Yes No Describe _____

Condensate Cutoff Device Yes No Describe _____

Condensate Line Trapped and Correctly Installed (if inside)
 Yes No Describe _____

Duct Certification Provided Yes No Describe _____

Electrical:

Disconnect Present & Proper Yes No Describe _____

Correct Breaker Size Yes No Describe _____

Outdoor Condenser Unit:

Correct Unit Installed Properly
 Yes No Describe _____

Clip Attachments to Slab or Stand Correct
 Yes No Describe _____

Proper Slab or Stand Yes No Describe _____

Condensate Line Trapped and Correctly Installed
 Yes No Describe _____

Roof Top Units Identified Yes No Describe _____

Electrical:

Disconnect Present & Proper Yes No Describe _____

Correct Breaker Size Yes No Describe _____

304.1 General. Equipment and appliances shall be installed as required by the terms of their approval, in accordance with the conditions of the listing, the manufacturer's installation instructions and this code. Manufacturer's installation instructions shall be available on the job site at the time of inspection.



Town of Ponce Inlet/Planning & Development Department

NOTICE OF COMMENCEMENT AFFIDAVIT

A Notice of Commencement is required for any permit project exceeding \$2,500 (\$7,500 for mechanical permits)

Work to be performed at the following address:

PONCE INLET, FL

PARCEL ID NUMBER: _____

I CERTIFY THAT A NOTICE OF COMMENCEMENT FOR THIS PROJECT HAS BEEN FILED FOR RECORDING WITH THE CLERK OF THE CIRCUIT COURT AT THE VOLUSIA COUNTY COURTHOUSE.

APPLICANT'S PRINTED NAME

APPLICANT'S SIGNATURE

STATE OF FLORIDA

COUNTY OF VOLUSIA

SWORN TO (OR AFFIRMED) AND SUBSCRIBED BEFORE ME THIS _____

DAY OF _____, BY _____
(Printed name of applicant)

WHO IS:

PERSONALLY KNOWN TO ME OR HAS PRODUCED ID

(TYPE OF ID): _____

Signature of Notary Public, State of FL

Print, Type of Stamp Name of Notary

NOTICE OF COMMENCEMENT

State of Florida
County of Volusia

Permit No

Tax Parcel Number

The UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement

1. **Description of Property:** (Legal description of the property, and street address if available.)

2. **General description of improvement:**

3. **Owner information:**

- a. Name and address
- b. Interest in property
- c. Name and address of fee simple titleholder (if other than owner)

4. **Contractor:**
Name and address

- a. Phone number
- Fax number

5. **Surety: Name and address**

- a. Phone number () _____
Fax number () _____
- b. Amount of bond \$ _____ .00

6. **Lender: Name and address**

- a. Phone number () _____
Fax number () _____

7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:**

- a. Name and address
- b. Phone number () _____
Fax number () _____

8. **In addition to himself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes**

- a. Phone number () _____
- b. Fax number () _____

9. **Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified) _____**

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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.

Signature of Owner

Print Name of Owner

State of Florida County of _____

Affirmed and subscribed before me this _____ day of _____ 20____ by _____,

who is personally known to me or who has produced _____ (type of ID) as identification.

Signature of Notary Public State of Florida

Print, Type or Stamp Name of Notary

Notarial Seal

Volusia County Permit Center Fax # 386-740-5238

FOR CLERK'S OFFICE USE ONLY