



## City of Miramar | Building Division

Community & Economic Development Department  
 2200 Civic Center Place | Miramar, Florida 33025  
 Tel: 954.602.3200 | Fax: 954.602.3635  
 www.miramarfl.gov

# A/C CHANGE OUT

### Who Can Apply (A)

**A. Licensed Mechanical Contractors:** Permit can be issued to Licensed Contractors properly registered in the Community Development - Building Division. Contractors shall provide all required applications properly signed and notarized. **Also, Contract signed by both parties (Contractor & Homeowner) shall be provided indicating contract value per every applicable discipline.**

### ATTENTION APPLICANT

**Disclaimer:** The information shown below does not necessarily reflect all requirements needed for permit application and inspections. This information is intended only for minimum guidelines about how to proceed with the application for a permit and the required inspections. **As per Florida Building Code**, construction documents shall be of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this Code and relevant laws, ordinances, rules and regulations, as determined by the **Building Official**.

### Required Documents

- Permit application describing scope of work. If ductworks are included in the scope of work, then additional information is required (i.e. plans, ductwork sizing, etc.) If Electrical works are included in the scope of work, then an Electrical application and plans are required.
- Affidavit of Awareness for HOA Association. This "Affidavit" is required as per City's ordinance, and it's mandatory affidavit which is required even if your property is not located in a Homeowner's Association.
- Contract signed by both parties (Contractor & Homeowner) including labor and materials.
- Notice of Commencement (F.S 713.135 d), if job value is more than \$7,500 as per value in a contract signed by both parties (Contractor & Homeowner) or as determined by Building Official. Notice of commencement must be filed at the Broward County Government Center / Records Division 115 S. Andrews Ave. Fort Lauderdale, FL 33301.
- One (1) sets of A/C Replacement sheet (See attached)
- One (1) set of AHRI Sheet
- Current Manufacturer's Tie-down Product Approval or an Original Engineered tie-down detail signed & sealed by Professional Engineer.

**Note: If unit is a roof mounted or gable wall mounted, then provide two (2) sets tie-down original engineered details signed & sealed by Professional Engineer.**

**Application Reviewed by →**

- Mechanical
- Electrical (If Electrical work is included in the scope of work, then an Electrical application form is required )

**Required Inspection → Final Inspection :** Locking refrigerant caps as per FBC (M) 1101.10) **Locking access port caps.** Refrigerant circuit access ports located outdoors shall be fitted with locking-type tamper-resistant caps or shall be otherwise secured to prevent unauthorized access.

**BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

Select Trade:  Building  Electrical  Plumbing  Mechanical  Other \_\_\_\_\_

Application Number: \_\_\_\_\_ Application Date: \_\_\_\_\_

<b>1</b>	Job Address: _____	Unit: _____	City: _____
	Tax Folio No.: _____	Flood Zone: _____	BFE: _____
	Building Use: _____	Construction Type: _____	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

<b>2</b>	Property Owner: _____	Phone: _____	Email: _____
	Owner's Address: _____	City: _____	State: _____ Zip: _____

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

<b>4</b>	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 FLORIDA  
COUNTY OF \_\_\_\_\_

STATE OF FLORIDA  
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 \_\_\_\_\_

Code in Effect: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ Permit Officer Issue Date: \_\_\_\_\_

**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.



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# Affidavit of Awareness of Homeowner's Association Regulations

The following "Affidavit" is required as per City's ordinance. This is a mandatory affidavit which is required even if your property is not located in a Homeowner's Association.

### ATTENTION APPLICANT. READ CAREFULLY

- For homeowner/Builder applicants, this affidavit can be notarized by Permit Clerk at the Building Division. Homeowner should appear in person with required picture I.D. (i.e. Driver License) and proof of ownership (i.e. Recorded Warranty, County Tax Statement). The physical address on I.D. shall match the address on the proof of ownership (i.e. Recorded Warranty Deed).
- For Licensed Contractor applicants, this affidavit can be notarized outside the Building Division by any Notary Public.

**Homeowner or Condominium Association Affidavit requirement. Miramar - City Code Sec. 22-29.(c)(1)** As part of the application process for a building permit in accordance with this chapter and with Section 713.20 of the Land Development Code, each applicant shall sign an affidavit (the "affidavit of awareness") indicating that the applicant is aware that, if the subject property is located in a Homeowners' Association or Condominium Association, as defined in this section, the applicant's property may be subject to additional regulations despite the issuance of a building permit by the city.

This serves to notify such homeowner that the issuance of a Building, Landscaping, or other permits by the City of Miramar, Florida does not exempt he/she from any and all other regulations imposed by the Homeowner's Association (HOA) in which his/her property is located. Be aware that despite the issuance of a building permit by the city, the applicant's property may result in additional regulations or denial to perform the work in your property located at HOA community.

Read and Initial to the left of the applicable statement

\_\_\_\_\_ I acknowledge that **I am the owner of property** located in the following Homeowner's Association:

\_\_\_\_\_  
Print Name of Homeowner's Association

\_\_\_\_\_ I acknowledge that my property is not located in a Homeowners' Association.

Name: \_\_\_\_\_  
Homeowner - Print Name

Job Address: \_\_\_\_\_

Miramar, Florida Zip Code : \_\_\_\_\_

Signature: \_\_\_\_\_  
Homeowner - Signature

STATE OF FLORIDA. Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public



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**A/C REPLACEMENT SHEET**

*Attention → This replacement sheet must be completely filled out as a requirement for permit approval.*

Contractor \_\_\_\_\_ Permit # \_\_\_\_\_

Job Address \_\_\_\_\_ Miramar, FL \_\_\_\_\_

**NEW EQUIPMENT**

Manufacturer (Make) \_\_\_\_\_

Condenser Model # \_\_\_\_\_

Min. Circuit Ampacity \_\_\_\_\_ Max. Circuit Ampacity \_\_\_\_\_

AHU Model # \_\_\_\_\_ Heatstrip KW \_\_\_\_\_

Min. Circuit Ampacity \_\_\_\_\_ Max. Circuit Ampacity \_\_\_\_\_

Package Unit Model # \_\_\_\_\_ Heatstrip KW \_\_\_\_\_

Min. Circuit Ampacity \_\_\_\_\_ Max. Circuit Ampacity \_\_\_\_\_

S.E.E.R : \_\_\_\_\_

Package Unit or Condenser Location →  Ground  
 Roof Mounted  
 Gable Wall

Wire Size \_\_\_\_\_ Type \_\_\_\_\_ (TW, THW, THWN)

Size of Disconnect, Circuit Breaker or fuse \_\_\_\_\_

**New 2017 Code Requirements for A/C Change Out Application/Permit**

1. AHRI Sheet.
2. FBC (M) 1101.10: Locking refrigerant caps
3. Current Product Approval Manufacturer’s tie-down or signed & sealed engineered details tie-down method.
4. Heater Kit must be marked on the air handler before Final Inspection. Failure to comply with this requirement will result in a failed inspection.

***Disclaimer:** Because of proposed projects vary widely respect to different scope of works, the information shown above does not necessarily reflect all requirements needed for the permitting process. As per Florida Building Code construction and/or permitting documents shall be of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail that it will conform to the provisions of this Code and relevant laws, ordinances, rules and regulations, as determined by the Building Official. Therefore, the Building Official or duly designated plans reviewer may require additional information to verify compliance with the Florida Building Code.*

PERMIT NUMBER:

**NOTICE OF COMMENCEMENT**

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

1. **DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** \_\_\_\_\_

**SUBDIVISION** \_\_\_\_\_ **BLOCK** \_\_\_\_\_ **TRACT** \_\_\_\_\_ **LOT** \_\_\_\_\_ **BLDG** \_\_\_\_\_ **UNIT** \_\_\_\_\_

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**

3. **OWNER INFORMATION:** a. Name \_\_\_\_\_

b. Address \_\_\_\_\_ c. Interest in property \_\_\_\_\_

d. Name and address of fee simple titleholder (if other than Owner) \_\_\_\_\_

4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**

6. **LENDER'S NAME, ADDRESS AND PHONE 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:

**NAME, ADDRESS AND PHONE NUMBER:**

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

**NAME, ADDRESS AND PHONE 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): \_\_\_\_\_, 20\_\_\_\_

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 or  
Owner's Authorized Officer/Director/Partner/Manager**

\_\_\_\_\_  
**Print Name and Provide Signatory's Title/Office**

State of Florida  
County of Broward

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_, as \_\_\_\_\_  
(name of person) (type of authority, ...e.g. officer, trustee, attorney in fact)

For \_\_\_\_\_  
(name of party on behalf of whom instrument was executed)

\_\_\_\_\_ Personally known or \_\_\_\_\_ produced the following type of identification: \_\_\_\_\_

Notary

\_\_\_\_\_  
(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

**Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:**

By \_\_\_\_\_ By \_\_\_\_\_