



APPLICATION FOR MECHANICAL PERMIT
 CITY OF OLDSMAR- PLANNING & REDEVELOPMENT
 100 STATE STEET WEST, OLDSMAR, FL 34677-3655
 PHONE: (813) 749-1124 FAX: (813) 855-2730

PERMIT NO. _____
 PERMIT FEES DUE: \$ _____
 RECEIPT NO: _____
 DATE: _____

Review Fee _____ Receipt No. _____ Total Amount Rec'd _____ Credit Card Authorization _____

6th EDITION (2017) FLORIDA MECHANICAL/ENERGY CONSERVATION CODE APPLIES

Inspections called in before 3:30PM will be performed the following business day.
Automated inspection line 813-749-1171

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 Property Owner's Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contractor's Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Fax: _____ E-mail: _____

Contractor's State Certification of Registration No. _____ PCCLB No. _____

Job Address: _____

Job Description: _____

Area of improvement: _____ sq. ft. Valuation: _____

Legal: Sec. ____ Township 28, Range 16, Subdivision _____ Blk. _____ Lot _____ 1st Floor Elev _____

Bonding Company _____ Address _____ City _____ State _____

Architect/Engineer's Name _____ Address _____ City _____ State _____

Base Fee, Residential and Commercial: \$50.00 --- Residential, New: (per dwelling unit) Base Fee + \$5.00 for each additional \$1000 or fraction over \$1,000 --- Residential AC Unit Replacement: \$50.00 --- Commercial, New or replacement: Permit Fee is based on Total Value of project – See Fee Schedule Table

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.



AIR CONDITIONING REPLACEMENT REQUIREMENTS

CITY OF OLDSMAR- PLANNING & REDEVELOPMENT

100 STATE STREET WEST, OLDSMAR, FL 34677-3655

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AIR CONDITIONING REPLACEMENT REQUIREMENTS

This sheet, placard, and plans must be posted on job site at time of inspection.

Please supply the following information in compliance with the 6th EDITION (2017) Florida Building Code, Energy Conservation, Section 503, Table 503.2.3(1), 503.2.3(2), 503.2.3(3).

1. Location of existing unit: _____
Equipment type: _____
Size Category: _____
Heating Section Type: _____
Subcategory or Rating Condition: _____
SEER of existing unit: _____
Test Procedure: _____
Existing wire and fuse breaker size: _____
2. Location of new unit: _____
Make and model number of new unit: _____
Size Category: _____
Heating Section Type: _____
Subcategory or Rating Condition: _____
SEER of new unit: _____
Size of Heat Strip: _____
New unit's amp capacity and max fuse/breaker: _____
3. Per Sec 301.13, Florida Mechanical Code, all mechanical equipment located in a flood zone must be elevated to a **Minimum of 10ft NAVD.**
4. Provide drawings detailing mounting an anchoring of all elevated and roof mounted mechanical equipment per Sec. 301.12, Florida Mechanical Code.

CONTRACTOR'S AFFIDAVIT: I certify that all of the foregoing information is accurate and that all work will be done in compliance with all applicable laws and Florida Building Code requirements.

Signature: _____

Mechanical Contractor

Mechanical Permit Application Checklist

Contract amount over \$10,000 - Plans and surveys must be signed and sealed

- A certified copy of the recorded Notice of Commencement (required if contract amount is \$7,500 or over)
- Copy of contract
- Mechanical Permit Application
- Plans and specifications must also be submitted as a PDF file if plans exceed 11 inches by 17 inches in size
- Three copies of the signed and sealed energy calculations
- Two copies of air conditioning equipment replacement form (A/C change-out)
- Two copies of mechanical roof top unit method of attachment
- Two copies of plans and specifications for new commercial installations

Contractor/subcontractor must be currently registered in the City of Oldsmar.

Inspections Required

- Duct and piping rough-in
- Duct insulation
- Final
- Underground