



**CITY OF BOYNTON BEACH**  
**DEVELOPMENT DEPARTMENT | BUILDING DIVISION**

100 East Boynton Beach Boulevard • Boynton Beach, FL 33425 • (561) 742-6350 • Fax 742-6357

## A/C CHANGE-OUT

The applicant is required to complete this form in order to receive a turn-around permit for an Exact A/C Change-Out. By accurately completing this form the applicant is attesting to the fact that by installing the new unit there will not be an increase in wire size.

By signature below I verify that either a representative of my company or I have inspected the existing conditions and there is no upgrade of the electrical system or service wiring changes required for the new unit(s) being installed. The condenser/compressor unit, air handler/heat strips, and KW size will not increase. I also affirm that there is an electrical disconnect within sight, meeting the requirements of 2011 NEC, Article 440.14.

**Print legibly or type and fill out form completely.**

Owner's Phone # \_\_\_\_\_

Owner's Cell Phone # \_\_\_\_\_

Permit Number:

**New unit will be installed in what type of facility** (check type of facility or fill in Other):

- |  |   |
|--|---|
| <input type="checkbox"/> Single-family, detached<br><input type="checkbox"/> Multi-family, apartment<br><input type="checkbox"/> Commercial<br><input type="checkbox"/> Industrial | <input type="checkbox"/> Single-family attached<br><input type="checkbox"/> Multi-family, condo<br><input type="checkbox"/> Public facility<br><input type="checkbox"/> Other |
|--|---|

**Job Address:** (including unit number and gate code, if applicable)

| <b>SPLIT SYSTEMS</b>              | <b>PACKAGED SYSTEMS</b>           |
|-----------------------------------|-----------------------------------|
| <b>Existing Unit Information:</b> | <b>Existing Unit Information</b>  |
| BTU/HR Capacity:                  | BTU/HR Capacity:                  |
| Heat kw:                          | Heat Kw:                          |
| SEER:                             | SEER/EER:                         |
| <b>Proposed Unit Information:</b> | <b>Proposed Unit Information:</b> |
| Condenser Make & Model:           | Make & Model:                     |
| BTU/HR Capacity:                  | BTU/HR Capacity:                  |
| SEER:                             | Heat Kw:                          |
| Air Handler Make & Model:         | SEER/EER:                         |
| Heat Kw:                          |                                   |

**Location of:**

Condenser \_\_\_\_\_

Air Handler \_\_\_\_\_

Disconnect \_\_\_\_\_

**(Note an electric sub permit complying with code is required for the installation of a new disconnect)**

**Any alterations to existing curbs, stands or supports will require a building sub permit.**

**I certify that the information entered on this form accurately represents the system installed.**

Qualifier: (print) \_\_\_\_\_ License No. \_\_\_\_\_

Signature: \_\_\_\_\_

Phone No. \_\_\_\_\_

Cell Phone \_\_\_\_\_