



**Town of Loxahatchee Groves**  
 155 F Road  
 Loxahatchee Groves, Florida 33470  
 561.793.2418 fax 561.793.2420

**Permit #** \_\_\_\_\_ **Job Address** \_\_\_\_\_

**A/C Change-out Compliance Form**

The following information is required for replacement of existing mechanical appliances and must be available for the field inspector at time of inspection. **Two 2) copies** of this form and **two 2) copies** the AHRI's shall be provided. One (1) for use on the jobsite at time of inspection and one (1) to be filed with permit department for recording.

**Replacement System Components**

\_\_\_\_\_ SEER or EER (circle one)

**Manufacturer:** \_\_\_\_\_

**AHU Model #:** \_\_\_\_\_ **Condenser Model #:** \_\_\_\_\_

**Voltage:** \_\_\_\_\_ **Voltage:** \_\_\_\_\_

**Heat Strip:** \_\_\_\_\_ **KVA/KW** **Size:** \_\_\_\_\_ **tons**

**Min. Circuit Ampacity:** \_\_\_\_\_ **Min. Circuit Ampacity:** \_\_\_\_\_

**HACR Breaker/Fuse Size:** \_\_\_\_\_ **Max.** **HACR Breaker/Fuse Size:** \_\_\_\_\_ **Max.**

**Evaporator Coil Model #:** \_\_\_\_\_

Required if air handler can be equipped with more than one evaporator coil

**Existing System Components**

**Manufacturer:** \_\_\_\_\_

**AHU Model #:** \_\_\_\_\_ **Condenser Model #:** \_\_\_\_\_

**Voltage:** \_\_\_\_\_ **Voltage:** \_\_\_\_\_

**Heat Strip:** \_\_\_\_\_ **KVA/KW** **Size:** \_\_\_\_\_ **tons**

**Min. Circuit Ampacity** \_\_\_\_\_ **Min. Circuit Ampacity** \_\_\_\_\_

**HACR Breaker/Fuse Size:** \_\_\_\_\_ **Max.** **HACR Breaker/Fuse Size:** \_\_\_\_\_ **Max.**

**Wire Size** \_\_\_\_\_ **(AWG)** **Wire Size** \_\_\_\_\_ **(AWG)**

**Evaporator Coil Model #** \_\_\_\_\_

Required if air handler can be equipped with more than one evaporator coil

**Certification**

With the authorization of the installing Contractor, I certify that the information entered on this form accurately represents the system s installed.

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date