



MARTIN COUNTY BUILDING DEPARTMENT  
 900 SE RUHNKE STREET  
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**Air Conditioning Change Out Form**  
**7th Ed (2020) Florida Building Code**  
**Air Conditioning System**

Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
 Single Package Unit: \_\_\_\_\_ Split System \_\_\_\_\_ Ductless Mini \_\_\_\_\_  
 Any Duct Replacement: \_\_\_\_\_ Yes \_\_\_\_\_ No  
 Refrigerant Line Replacement: \_\_\_\_\_ Yes \_\_\_\_\_ No  
 \*Rooftop A.C. Stand Installation: \_\_\_\_\_ Yes \_\_\_\_\_ No  
 \*Smoke Detector Installation (over 2000 cfm): \_\_\_\_\_ Yes \_\_\_\_\_ No

**\*Commercial Permits Only**

**One form required for each separate A/C system installed**

**NEW REPLACEMENT** System Components

Manufacturer \_\_\_\_\_  
**AIR HANDLER** Model No \_\_\_\_\_  
 SEER/EER \_\_\_\_\_  
 Size \_\_\_\_\_ tons Heat Strip \_\_\_\_\_ KVA/KW  
 HACR Breaker/Fuse size:  
 \_\_\_\_\_ Min. \_\_\_\_\_ Max.  
 Wire size \_\_\_\_\_  
 Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
 Refrigerant type \_\_\_\_\_  
 Location: \_\_\_\_\_ Existing \_\_\_\_\_ New  
 Configuration: \_\_\_\_\_ Horizontal \_\_\_\_\_ Vertical

Manufacturer \_\_\_\_\_  
**CONDENSER** Unit Model No \_\_\_\_\_  
 SEER/EER \_\_\_\_\_  
 Size \_\_\_\_\_ tons  
 HACR Breaker/Fuse size:  
 \_\_\_\_\_ Min. \_\_\_\_\_ Max.  
 Wire size \_\_\_\_\_  
 Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
 Refrigerant type \_\_\_\_\_  
 Location: \_\_\_\_\_ Existing \_\_\_\_\_ New  
 Location: \_\_\_\_\_ Ground \_\_\_\_\_ Roof top

**OLD EXISTING** System Components

Manufacturer if known \_\_\_\_\_  
 SEER/EER if known \_\_\_\_\_  
 Size \_\_\_\_\_ tons Heat Strip \_\_\_\_\_ KVA/KW  
 Existing HACR Breaker/Fuse size: \_\_\_\_\_  
 Existing Wire size \_\_\_\_\_ (A.W.G.)  
 Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
 Refrigerant type \_\_\_\_\_

Manufacturer if known \_\_\_\_\_  
 SEER/EER if known \_\_\_\_\_  
 Size \_\_\_\_\_ tons  
 Existing HACR Breaker/Fuse size: \_\_\_\_\_  
 Existing Wire size \_\_\_\_\_ (A.W.G.)  
 Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
 Refrigerant type \_\_\_\_\_

**Certification**

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

\_\_\_\_\_  
 Signature of applicant

\_\_\_\_\_  
 Date

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