



Town of Manalapan

Building Department • 600 South Ocean Blvd., Manalapan, Florida 33462
Website: <http://www.manalapan.org> • Phone: 561-585-9477 • Fax: 561-585-9498

AC CHANGE OUT CHECKLIST FORM - (FBC 8th Edition 2023)

THE FOLLOWING INFORMATION & DOCUMENTS ARE REQUIRED FOR PERMIT PROCESSING

The Town of Manalapan Building utilizes a new all-digital platform called My Government Online (MGO). You must first create an account to submit permits and schedule inspections which can be done by visiting: MGOconnect.org

- Completed Permit Application
- Completed HVAC Replacement Worksheet
- Provide engineered attachment details or A/C tie down product approval per current FBC
- AHRI data
- Cost estimate on contractor letterhead. The cost estimate must include a description of the work and a breakdown of costs.
- Notice of Commencement, if applicable

GENERAL INFORMATION

Applicant responsible to be on site and provide access for inspection(s) per current Florida Building Code. All approved construction documents are to be on site for the inspection.

FEE SIMPLE TITLEHOLDER, BONDING COMPANY, ARCHITECT/ENGINEER AND MORTGAGE LENDER INFO IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS & NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$5,000 OR MORE (EXCEPT HVAC REPAIR /REPLACEMENT < \$15,000). PLEASE ADDRESS ALL ITEMS.

⁹
Fee Simple Titleholder's Name (If other than owner): _____

Fee Simple Titleholder's Address (If other than owner): _____

City: _____ **State:** _____ **Zip:** _____

Same as Owner

¹⁰
Bonding Company: _____

Bonding Company Address: _____

City: _____ **State:** _____ **Zip:** _____

Not Applicable

¹¹
Architect/Engineer's Name: _____

Architect/Engineer's Name Address: _____

City: _____ **State:** _____ **Zip:** _____

Not Applicable

¹²
Mortgage Lender's Name: _____

Mortgage Lender's Address: _____

City: _____ **State:** _____ **Zip:** _____

Not Applicable

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.

NOTICE TO CONTRACTOR: FOR A DIRECT CONTRACT GREATER THAN \$5,000 (EXCEPT FOR HVAC SYSTEM REPAIR OR REPLACEMENT LESS THAN \$15,000), FLORIDA STATUTES REQUIRE THE APPLICANT TO FILE WITH THE ISSUING AUTHORITY, PRIOR TO THE FIRST INSPECTION, EITHER A CERTIFIED COPY OF THE RECORDED (BY OWNER) NOTICE OF COMMENCEMENT OR A NOTARIZED STATEMENT (BY OWNER) THAT THE NOTICE OF COMMENCEMENT HAS BEEN FILED FOR RECORDING, ALONG WITH A COPY THEREOF. IN THE ABSENCE OF A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT, NO SUBSEQUENT INSPECTIONS CAN BE PERFORMED UNTIL THE APPLICANT FILES SUCH CERTIFIED COPY WITH THE ISSUING AUTHORITY. THE CERTIFIED COPY OF THE NOTICE OF COMMENCEMENT MUST CONTAIN THE NAME AND ADDRESS OF THE OWNER, THE NAME AND ADDRESS OF THE CONTRACTOR, AND THE LOCATION OR ADDRESS OF THE PROPERTY BEING IMPROVED.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

FOR APPLICATIONS SUBMITTED UNDER THE PRIVATE PROVIDER PROVISIONS OF F.S. SECTION 553.791, THIS APPLICATION IS NOT CONSIDERED COMPLETE OR SUFFICIENT FOR PURPOSES OF SUBMISSION TO THE BUILDING DEPARTMENT UNTIL THE APPLICANT SECURES ALL NECESSARY APPROVALS FROM OTHER DEPARTMENTS OR AGENCIES INCLUDING, BUT NOT LIMITED TO, PLANNING, ZONING, ENGINEERING, FIRE RESCUE, ENVIRONMENTAL, AND THE FLORIDA DEPARTMENT OF HEALTH.

OFFICE USE ONLY BELOW THIS LINE

¹³
CODE EDITION/NOTES: _____

¹⁴
USE (CHECK ONE):

- 1 & 2 FAMILY TOWNHOUSE CONDOMINIUM
 MULTI-FAMILY COMMERCIAL INDUSTRIAL
 AGRICULTURAL - BLDG CODE EXEMPT OTHER: _____

USE CHANGE: _____



TOWN OF MANALAPAN

600 South Ocean Boulevard, Manalapan, FL 33462
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CONSTRUCTION SITE MAINTENANCE

(refer to Construction Site Standards Sec. 152.110 of Town of Manalapan Code)

Construction Site Address; _____

Permit Number; _____

- No vehicles may be parked on the swale (public right-of-way)
- Any permission granted for off-site parking within the Town of Manalapan shall be provided in writing by the property owner and a copy received by Town Officials prior to parking off-site
- Contractor shall install a minimum six foot (6'-0") high temporary, fabric-lined chain link fence for the project per Town code Sec. 152.110. Please note: this fence may be required to be on all sides of the property
- Dumpsters must be covered and emptied when full and placed inside the fenced site
- Port-a-potties must be placed inside the fenced site and cannot be visible from the street
- No dirt piles shall be greater than six feet (6'-0") in height above the crown of the road
- All construction sites must be watered down daily or with more frequency as required OR covered in order to prevent dust and debris from escaping to adjacent properties
- Whenever possible/feasible, the Contractor shall notify adjacent property owners 24 hours in advance of any activity which is anticipated to create unusually loud noise, prolonged disturbance, or unusual occurrence (i.e... Demolition)
- Contractor shall contact Town Utilities at 561-586-3699 prior to starting work. Any damage including tampering, to water meter boxes, water meter box lids, and Town owned water lines shall be the responsibility of the Contractor.
- Meters should be visibly marked and kept clear of vehicles, building materials or dirt piles in order to facilitate meter readings and/or emergency shut offs

Contractor Signature; _____ Date _____

Instrument Prepared By:

Name: _____

Address: _____

PERMIT NUMBER: _____

STATE OF: _____

NOTICE OF COMMENCEMENT

TAX FOLIO NO.: _____

COUNTY OF: _____

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

1. **DESCRIPTION OF PROPERTY** (Legal description of the property & street address, if available) **Legal Description:** _____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:** _____

3. **OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

a. Name and address: _____

b. Interest in property: _____

c. Name and address of fee simple titleholder (if different from Owner listed above): _____

4. a. **CONTRACTOR:** Name & Address _____

b. Phone number: _____

5. **SURETY** (if applicable, a copy of the payment bond is attached): a. Name and address: _____

b. Phone number: _____ c. Amount of bond: \$ _____

6. a. **LENDER:** Name and address: _____

b. 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:

a. Name and address: _____

b. Phone numbers of designated persons: _____

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

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date will be 1 year after 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 SITE OF THE IMPROVEMENT 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 Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

(Print Name and Provide Signatory's Title/Office)

The foregoing instrument was acknowledged before me by means of _____ physical presence or sworn to (or affirmed) by _____ online notarization,
this _____ day of _____, 20____ by _____
(name of person)

as _____ for _____
(type of authority, e.g. officer, trustee, attorney in fact) (name of party on behalf of whom instrument was executed)

Notary

(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known OR Produced Identification Type of Identification Produced _____



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AIR CONDITIONING REPLACEMENT DATA

Application Number _____

Job Address: _____ Unit _____

FILL IN APPLICABLE INFORMATION

<u>Data</u>	<u>Existing Unit (1)</u>				<u>New Unit</u>			
Manufacturer								
SEER (2) / EER (3)								
Nominal Tons								
Package/Heat Pump Model #								
Condensing Unit Model #								
AHU Model #								
KW Strip Heat								
Minimum Circuit Ampacity	c/u		ahu/pk g		c/u		ahu/pkg	
Maximum Overcurrent Protection	c/u		ahu/pk g		c/u		ahu/pkg	

- (1) Provide equipment sizing calculations if existing unit data is not available (ACCA Manual N, J, etc.)
- (2) Provide AHRI Certificate

Will a stand, curb adapter be installed?	Yes		No	
Duct smoke detector installed or reconnected? <i>FMC606.2.1</i>	Yes		No	
Is the duct s/d connected to a Fire Alarm Panel?	Yes		No	
Will the A/C location be the same?	Yes		No	
New Electrical Disconnect?	Yes		No	

*****COMPLIANCE WITH FBC MECHANICAL 602.2.1 MANDATORY*****

Please include the following:

- ___ Copy of AHRI and other support documents. S.E.E.R.2 _____
- ___ For Condenser or A.H.U. replacement only (partial system): provide manufacturers support Documentation, or FL P/E. verification, as per the 2023 FL Energy Conservation Code (403.5.3)
- ___ Provide engineered attachment details FMC 301.15 or Product Approval
- ___ Provide plan if replacing duct work – Additional Review Required

Contractor Signature _____ Date _____

Company Name _____ Contractor License _____

The Building Department will enforce the following electrical/mechanical code requirements for the replacement of existing air conditioning and heating equipment:

1. **ALL PLENUM SPACES ARE REQUIRED TO COMPLY WITH FMC 602.2.1**
 2. The condensing unit disconnect means shall in no case located further than six (6) feet from the service side of the unit in line of site.
 3. Condensing unit electrical disconnect means shall be one of the following types:
 - a. Non-fusible – overcurrent protection supplied at the main breaker panel. *
 - b. Fused – overcurrent protection supplied by proper size fuses per the unit identification plate.
 - c. Circuit Breaker – overcurrent protection supplied by the proper size breaker per the unit identification plate. *
 4. The disconnect means for a closet-installed air handler shall be an internal component of the unit.
 5. For attic-installed air handlers, the electrical disconnect means shall be a non-fusible type. In no case shall a fused or circuit breaker type disconnect be installed in an attic.
 6. Adequate working clearances shall be provided per the 2023 FL Building Code Mechanical.
 7. Condensate drain lines and traps shall be installed as per the 2023 FL Building Code Mechanical, and as per manufacturer’s recommendations.
 8. Air handling units shall be equipped with auxiliary drain pans, float, and/or secondary drain lines as per the FL Building Code Mechanical.
 9. A final inspection is required for all equipment replacement.
10. **AN ELECTRICAL INSPECTION IS MANDATORY.**

*ALL CIRCUIT BREAKERS PROVIDING OVERCURRENT PROTECTION FOR MECHANICAL EQUIPMENT SHALL BE H.A.C.R. TYPE PER THE UNIT IDENTIFICATION PLATE.

Overcurrent Protection Must Match the Nominal Voltage of the Building – I.E. 240/208/480