

# VILLAGE OF TEQUESTA

345 TEQUESTA DRIVE  
TEQUESTA, FL 33469  
Phone: (561) 768-0450 Fax: (561) 768-0698

## A/C CHANGE-OUT FORM

The following information is required for replacement of mechanical equipment and **MUST** be available for the inspector at the time of inspections. **Two (2) copies shall be provided, one for the job site and the other for the property file.**

### AIR CONDITIONING SYSTEM

Owner's Name:	SEER:
Project Address:	

### REPLACEMENT SYSTEM COMPONENTS

Manufacturer:	Roof Top: <input type="radio"/>	On Ground: <input type="radio"/>
Air Handler Model No.	Condenser Unit Model No.	
Voltage:	Voltage:	
Heat Strip:	KVA/KW Size:	tons
Minimum Circuit Ampacity:	Minimum Circuit Ampacity:	
HACR Breaker/Fuse Size:	HACR Breaker/Fuse Size:	
Min.	Max.	Max.
Wire Size: (AWG)	Wire Size:	(AWG)
Required if the air handler can be equipped with more than one evaporator coil Evaporator Coil Unit Model No.:		

### EXISTING SYSTEM COMPONENTS

Manufacturer:		
Air Handler Model No.	Condenser Unit Model No.	
Voltage:	Voltage:	
Heat Strip:	KVA/KW Size:	
Minimum Circuit Ampacity:	Minimum Circuit Ampacity:	
HACR Breaker/Fuse Size:	HACR Breaker/Fuse Size:	
Min.	Max.	Max.
Wire Size: (AWG)	Wire Size:	(AWG)
Required if the air handler can be equipped with more than one evaporator coil. Evaporator Coil Unit Model No.:		

### CERTIFICATION

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

SIGNATURE

DATE: