



## REQUIREMENTS FOR AC CHANGE OUT PERMITS

1. SUBMIT ENERGY CALCULATIONS ALONG WITH PERMIT APPLICATION
2. LEAVE THE DUCT SEAL AFFIDAVIT FORM (PROVIDED) AT THE JOB SITE LOCATION AT TIME OF INSPECTION ALONG WITH CERTIFICATE OF PRODUCTS RATING FORM (AHRI FORM).

**\*\*\*THE AFFIDAVIT IS TO BE SIGNED AND NOTARIZED AFTER THE WORK HAS BEEN COMPLETED\*\*\***



### DUCT SEAL AFFIDAVIT

Company \_\_\_\_\_

License # \_\_\_\_\_

Address \_\_\_\_\_

Permit # \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I \_\_\_\_\_, affiant, hereby affirm that I am the duly licensed contractor of record for the above referenced permit, that all of the forgoing information is true and accurate, and that the duct sealing at the above referenced address has been completed in accordance with all applicable codes and standards.

Contractor's name (printed) \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

State of Florida  
County of Pasco

On this \_\_\_\_ day of \_\_\_\_\_ 20\_\_ before me, the undersigned notary public, personally known/produced ID, appeared \_\_\_\_\_, known to me the person whose name is subscribed to the within instrument and acknowledged that he/she executed the same for the purposes therein contained.

\_\_\_\_\_

Notary Public