

CITY OF ANGELS
 BUILDING DEPARTMENT
 200 B MONTE VERDA STREET
 P.O. BOX 667
 ANGELS CAMP, CA 95222
 (209)736-1346

HVAC Information Sheet

Project Address: _____

Permit No: _____

Complete the information in the table below as it applies to the work that will be performed.

# Of Units To Install	Equipment	Tons/ BTU's	# New Electric Circuits	# New Gas Lines
	Split System			
	Package Unit			
	Roof Top Package Unit			
	Heat Pump			
	Furnace			
	Air Conditioning Only			
	Condensing Unit Change-out			
	Roof Top Package Unit Change-out			
	Duct Installation			
	Heating/Cooling Coil Change-out			
	Heat Exchanger Change-out			
	Condenser Change-out			
	Other			

- ❖ A signed copy of the 2008 Building Energy Efficiency Standards HVAC Change-outs and Repairs must accompany this application. By signing this copy, you are acknowledging that you are aware of your responsibilities with respect to the Energy Code and the required H.E.R.S. testing.
- ❖ For residential projects, no new mechanical equipment may be installed on a roof unless the previous mechanical equipment was installed on the roof.
- ❖ Duct testing by a certified H.E.R.S. rater is required with each of the equipment installations listed in the table above. See Energy Efficiency Standards for specifics. The certificate of compliance must be left at the job site and provided to the inspector at the time of the final inspection.

Applicant Signature: _____

Date: _____