

Building Permit #: _____

Mechanical Permit #: _____

Job Address: _____

FLORIDA BUILDING CODE MECHANICAL CERTIFICATION

I CERTIFY THAT THIS HVAC INSTALLATION MEETS THE REQUIREMENTS OF FLORIDA BUILDING CODE, SECTION M1602.4, BALANCED RETURN AIR.

Signature: _____

Date: _____

IMPORTANT

Complete this form and post it in a prominent location near the air handler or furnace. Builder, Contractor or Homeowner will be responsible for providing Building Inspections Department with a copy of this document **PRIOR** to issuance of Certificate of Occupancy.