



City of Doral Building Department

**AIR CONDITIONING
EMERGENCY REPLACEMENT PROCEDURES**

The state of Florida's Building code Sec. 105.2.1 allows contractors to replace equipment in an emergency. The electronic permit application must be complete and paid for before the completion of the replacement is made.

PROCEDURE:

You may send an email to the Chief Mechanical Inspector Jorge Granadillo at jorge.granadillo@cityofdoral.com

Once the attached form has been completed, submitted, and paid for to the Building Department, the process will begin the reviews.

A contractor who fails to contact the Building Department, Chief Mechanical Inspector prior to replacing an air conditioning system and performs the work without a permit will be subject to a permit fee of two (2) times the current base permit fee plus a one hundred dollar (\$100) fine.

Contact details:

Jorge Granadillo
Chief Mechanical Inspector
Building Department
8401 NW 53 Terrace, 2nd floor
Doral, FL 33166
(305) 593-6700 ext 3105
Jorge.Granadillo@cityofdoral.com

Should your email bounce, please see full personnel directory online at <https://www.cityofdoral.com/all-departments/building/bd-personnel/>



AIR CONDITIONING REPLACEMENT DATA

This form must accompany all air conditioning replacement permit applications.

Contractor: _____ Permit #: _____
 Site address: _____ Unit/Apt. #: _____
 _____ State _____
 _____ License/Cert # _____

DATA	EXISTING UNIT	NEW UNIT	ELECTRICAL	
Manufacturer			MIN/AMP	MAX/AMP
Pkg. Unit Model#				
Ahu/Coil Model#				
Condenser Model#				
Heater KW				
System Size (Tons)				
SEER /EER				
AH RI Reference Number:				

NOTE: All units must have the design highlighted and a certification that the panel(s) withstands hurricane force winds.

Please provide location of equipment (include at/above grade) _____.

(Ground level example = 0 foot)

(Roof level example = 10 to 12 foot per floor)

Provide Manufacturer's literature showing equipment model and measurements.

Have you complied with one of the following methods? Yes ☐

1. Provide copy of the unit's current Notice of Acceptance or State Product Approval.
2. Signed and sealed engineering for the model unit covered in the permit (signed and sealed).
3. Manufacturer's published literature for the unit explicitly listing the wind resistance for the installation.

Is a new roof curb/curb adapter or stand needed? Yes ☐ No ☐
 (Submit design requirements per F.B.C on Roof mounted equipment with application)

Is new equipment being moved or relocated? Yes ☐ No ☐

Is this replacement a result of Flood Damage? Yes ☐ No ☐

Is new ductwork being installed? Yes ☐ No ☐

Is an air duct smoke detector installed? Yes ☐ No ☐

Contractor Signature: _____ Date: _____



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AIR CONDITIONING EMERGENCY REPLACEMENT FORM

CONTRACTOR INFORMATION

Company Name _____
 Contact Person _____
 Phone Number _____

ADDRESS WHERE AIR CONDITIONER IS BEING REPLACED

Address _____
 Suite/Apt # _____ Zip Code _____

Homeowner's/Condo Association Information (HOA):

HOA Name: _____
 Contact Person: _____
 Contact Phone #: _____
 Contact email address: _____

TO BE COMPLETED BY THE CHIEF MECHANICAL INSPECTOR

☐ Approved ☐ Denied

Comments:

Authorization:

Print Name

Signature

Date