



Community Development Department
 14000 City Center Dr., Chino Hills, CA 91709
 (909) 364-2740 Fax (909) 364-2795
 www.chinohills.org

RESIDENTIAL HVAC CHANGEOUT WORKSHEET

Project Address: _____

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

# OF UNITS INSTALLED	TYPE OF EQUIPMENT	TONS/BTU's	# NEW ELECTRICAL CIRCUITS	# NEW GAS LINES
	SPLIT SYSTEM			
	PACKAGE UNIT			
	HEAT PUMP			
	FURNACE/AIR HANDLER			
	AIR CONDITION ONLY			
	CONDENSING UNIT CHANGE OUT			

Total valuation (labor & material) of above: _____

Is there 40 feet or more of duct in unconditioned space (attic/crawl space)? Yes _____ No _____

If "Yes" is checked, duct testing by a certified HERS rater is **required** (see attached 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 final inspection.

Duct Test Exemption Request

If "No" is checked and you are requesting an exemption under the 40 foot duct rule. Please indicate all existing and/or new ducting in unconditioned spaces.

<u>Room</u>	<u>Duct Length</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
TOTAL Duct Length	_____

MUST be less than 40 ft.

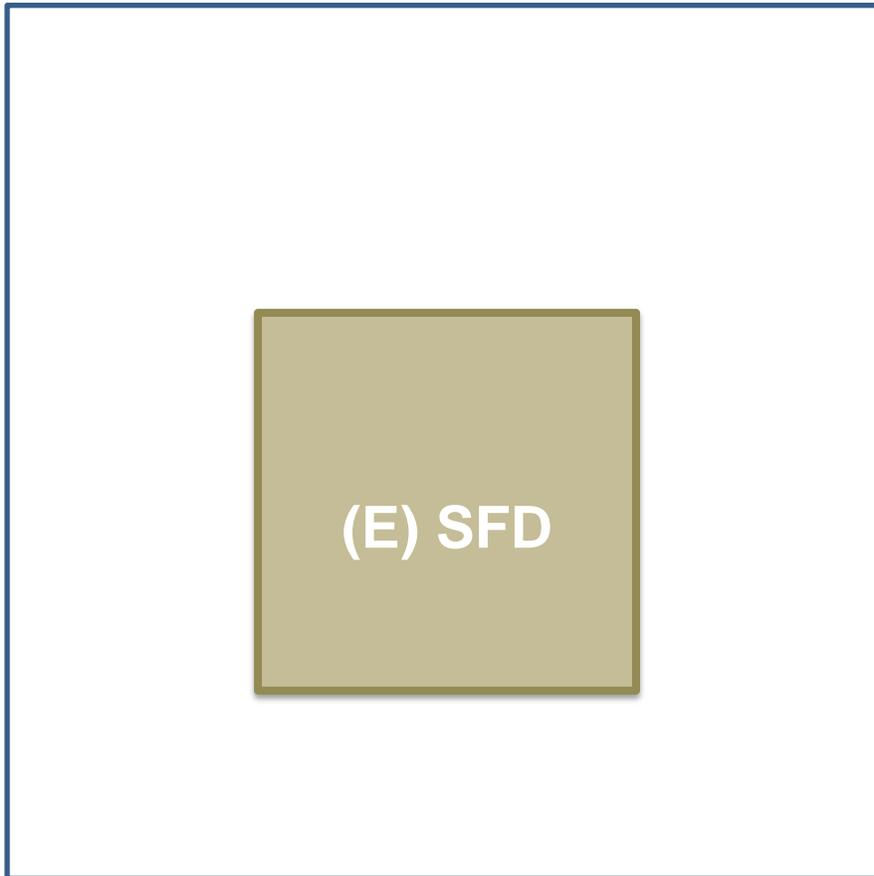
I certify that either I or my authorized agent have measured the ducting at the above project address and the lengths are true and correct.

Contractor/Owner

Date

HVAC SITE PLAN

Please write in each property line length, where the unit will be, and indicate the unit's distance from all property lines.



STREET NAME

OWNER'S NAME:
ADDRESS: