City of North Port

Neighborhood Development Services
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North Port, Fl. 34286

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DUCT SEALING CERTIFICATION FORM

Mandatory Duct Inspection Certification for HVAC Change-Out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912

Owner:	Contractor
Street Address:	Jurisdiction:
City:	Permit No.:
Zip:	Final Inspection Date:

I **Certify** that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

____ Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.

____ Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)

____ The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)

____ System was tested (see below) and repairs were made as necessary (Section 101.4.7.1.1 exception 3)

Signature: _____ Date: _____

Printed Name: _____

Contractor License Number: _____

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I **Certify** I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in w.c.)

Signature: _____ Date: _____

Printed Name: _____