



City of Jacksonville - Department of Public Works
Building Inspection Division

**PROPERTY OWNER REQUEST FOR INSPECTION EXEMPTION FOR
REPLACEMENT OF ONE- AND TWO-FAMILY HVAC EQUIPMENT**

Revised 3/26/2026

1. Please complete all fields. Print Legibly.
2. Request must have a notarized property owner signature.
3. Submit completed form to the Mechanical Inspection section of the Building Inspection Division (214 North Hogan Street, Jacksonville, FL 32202). This form may be mailed, delivered in person, or emailed to BIDMechanical@coj.net.
4. There is no fee for this request and the Building Inspection Division reserves the right to deny this request.

Permit Number: _____ Total Cost: _____ (cannot exceed \$5,000)

Address: _____

Contractor Name and Address: _____

I hereby waive the required inspections of this permitted work. In consideration for not being required to have inspections, I hereby declare that I will not hold the City of Jacksonville responsible for any adverse consequences resulting from this work, and further that I will not initiate, execute, or enjoin any legal action against the City of Jacksonville for such consequences. A copy of this letter will be recorded as an official record with the Building Inspection Division permit history so that any and all future buyers/owners of this property may be made aware of the status of work performed on this structure. As the homeowner, I understand that inspections performed to ensure compliance with the Florida Mechanical Code are to protect my health, safety and welfare. I also understand that Florida Statute 553.80(3)(b) allows local governments to adopt rules granting a single-family homeowner exemption to required inspections for work valued under \$5000.00, and that the City of Jacksonville has adopted such a rule for replacement of existing electric one- and two-family HVAC equipment only, when requested by the property owner.

I attest this information is true and accurate to the best of my knowledge.

Property Owner Signature: _____

Property Owner Printed Name: _____

NOTARY AS TO PROPERTY OWNER

STATE OF FLORIDA

COUNTY OF _____ :

The foregoing instrument was acknowledged before me this _____ day of _____, 20 __, ,

Personally appeared _____

Who produced _____ as identification.

Signature of Notary: _____

Printed Name of Notary: _____

My Commission Expires: _____