



## Furnace/Air Conditioner Permit by FAX or Mail

(This is an application only, the official Building Permit will be sent later in the mail)

**Conditions:**

- 1) The project location must be within the unincorporated **County** or the cities of **Clayton, Lafayette, Moraga or Orinda**.
- 2) The Permit must be taken out by either the owner of record or by a licensed contractor.
- 3) If the owner is going to do the construction, they must also sign and fax an Owner/Builder Declaration.
- 4) No special conditions or encumbrances to the building process may be on the project location.
- 5) Only furnace/air conditioner permits may be applied for by FAX or Mail using this form. Permits requiring plan check or special planning department or other agency approvals must be applied for in person at one of our offices.
- 6) The credit card listed must be valid and have the appropriate amount of credit.

The "Permit by FAX or Mail" program is an optional enhancement to customer service. Any applicant may be required to appear in Martinez to apply for a permit.

	Property Owner	Contractor
Name		
Mail to: (x)	<input type="checkbox"/> Notification Address	<input type="checkbox"/> Business Address
Street & No.		
City		
State, Zip		
License		
Phone/Fax	Fax:	Fax:
	<b>Project Location</b>	
Street & No.		
City	<input type="checkbox"/> Clayton <input type="checkbox"/> Moraga <input type="checkbox"/> Orinda <input type="checkbox"/> Lafayette <input type="checkbox"/> Unincorporated County: _____ <span style="margin-left: 150px;">(City)</span>	
Cross Street		
Parcel No.	If Known	

# Select one or more type of work

## Type of Work (Residential Only)

Or Reinspection Fee (check all that apply)

<input type="checkbox"/>	New Furnace (to replace existing floor heater, wall heater, etc.)
<input type="checkbox"/>	Replace Existing Forced Air Unit
<input type="checkbox"/>	New Air Conditioner
<input type="checkbox"/>	Replace Existing Air Conditioner

If project is in **EI Cerrito, EI Sobrante, Hercules, Kensington, Pinole, Richmond or San Pablo**, please fill out the **CF-1R-ALT-HVAC** form section for **Climate Zone 3** (page 5). All other areas of the County please fill out **CF-1R-ALT-HVAC** form section for **Climate Zone 12** (page 6).

For projects in **all other areas** of the County, **HERS TESTING AND VERIFICATION OF DUCT SEALING REQUIRED** unless one (or more) of the following boxes is checked.

<input type="checkbox"/>	Less than 40 linear feet of duct system in unconditioned space.
<input type="checkbox"/>	Existing ducts constructed, insulated or sealed with asbestos.
<input type="checkbox"/>	Ducts previously sealed, tested and verified by <b>HERS</b> rater.

**Detailed Equipment Installation/Work Description:** (Example: Replace existing HVAC system.)

## Job Valuation:

<b>Reinspection Fee: \$</b>	<b>Permit No.</b>
Reinspection Fee ( Select one of the two, only if you already have a permit and are paying for a reinspection)	
Valuation < \$5,000	\$50.00
Valuation > \$5,001	\$100.00

**All fees are subject to change and will be charged at the rate in effect at the time your payment is made.**

Check One	For all permits except reinspection fee:	
<input type="checkbox"/>	Unincorporated Area	\$131.25
<input type="checkbox"/>	City of Clayton	\$131.25
<input type="checkbox"/>	Town of Moraga	\$140.63
<input type="checkbox"/>	City of Orinda	\$140.63
<input type="checkbox"/>	City of Lafayette	\$140.63
	State Special Revolving Fund Fee	\$1.00 for every \$25,000 in Job Value

## Payment Information

	Payment Method		Amount
<input type="checkbox"/>	Check (Mail Only)	No:	\$
<input type="checkbox"/>	Money Order (Mail Only)		\$
<p><i>Effective September 15, 2014, all credit card payments will be charged a 2.5% convenience fee by our third party payment processor. This fee will show up as a separate charge on your credit card statement.</i></p>			
<input type="checkbox"/>	Credit Card	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard	<input type="checkbox"/> Discover <input type="checkbox"/> American Exp.
Name on Card:			
Expiration Date:		Card #:	Security code:
Signature: (for fax or mail-ins)		X	

## Fax or Mail Application to one of our office below

**CCC Building Inspection  
Application and Permit Center**  
 30 Muir Road  
 Martinez, CA 94553  
 Tel: (925) 674-7200  
 Fax: (925) 674-7267

### LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class \_\_\_\_\_ License No. \_\_\_\_\_

Date \_\_\_\_\_ Contractor Signature \_\_\_\_\_

### OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

I, as owner of the property, or my employees with wages as their sole compensation, will do  all of or  portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.).

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.).

I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

Date \_\_\_\_\_ Signature of Property Owner or Authorized Agent \_\_\_\_\_

### WORKERS' COMPENSATION DECLARATION

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No. \_\_\_\_\_

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are: Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of Agent \_\_\_\_\_ Phone # \_\_\_\_\_

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

### DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).

Lender's Name \_\_\_\_\_

Lender's Address \_\_\_\_\_

By my signature below, I certify to each of the following:

I am the property owner or authorized to act on the property owner's behalf. I have read this application and the information I have provided is correct. I agree to comply with all applicable city and county ordinances and state laws relating to building construction. I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

Date \_\_\_\_\_ Signature of Property Owner or Authorized Agent \_\_\_\_\_



CERTIFICATE OF COMPLIANCE	CF1R-ALT-03-E
Alterations - HVAC CZ 1, 3 to 7 and 16 (formerly CF-1R-ALT-HVAC) West Contra Costa County	
(Page 1 of 1)	

<b>Site Address:</b>		<b>Enforcement Agency:</b> Contra Costa County DCD		<b>Date Prepared:</b>	<b>Permit#:</b>
Equipment Type		Equipment Efficiency		New: Ducting, Plenums, Lineset Required R-value	Conditioned Floor Area (sq ft)
<input type="checkbox"/> Packaged System	<input type="checkbox"/> Evaporator Coil	____ AFUE	____ COP	<input type="checkbox"/> R-6 (CZ 1,3-7) Ducts	Served by system
<input type="checkbox"/> Split System	<input type="checkbox"/> Condensing Unit	____ SEER	____ HSPF	<input type="checkbox"/> R-8 <sup>1</sup> (CZ 16) Ducts	_____ sq ft
<input type="checkbox"/> Furnace	<input type="checkbox"/> Lineset	____ EER		<input type="checkbox"/> R-6 (all CZ's) Plenums	<input type="checkbox"/> Setback
				<input type="checkbox"/> R-5 or R7.5 Lineset <sup>3</sup>	(If not already present, must be installed)

**HERS VERIFICATION SUMMARY** Installer determines work to be completed and matches to one of the options below. At permit application this form is allowed to be filled out by hand. For final inspection all forms are to be registered (no hand filled forms allowed) and a copy left on site.

<input type="checkbox"/> <b>1. HVAC Changeout/Repair</b> Can include new ducting	<b>Required Compliance Documents to be left on site for Final:</b>
All Equipment, Condenser Unit, Evaporator Coil, Air Handler/Furnace	CF1R-ALT-02-E CF2R: MECH-01, MECH-20-HERS CF3R: MECH-20-HERS

**Installer Requirement:** Duct leakage ( $\leq 15\%$  or,  $\leq 10\%$  to outside, or seal all accessible leaks)  
 Exempted from duct leakage testing if:  
 1. Duct system registered with HERS provider as previously sealed, or  2. There is less than 40 linear feet of duct in unconditioned space, or  3. Existing duct systems are constructed, insulated or sealed with asbestos (list manufacture date of building \_\_\_\_\_)

<input type="checkbox"/> <b>2. New HVAC System</b>	<b>Required Compliance Documents to be left on site for Final:</b>
All new equipment and All New Ducts <sup>2</sup>	CF1R-ALT-02-E CF2R-MECH-01, MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS CF3R-MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS <sup>2</sup>

**Installer Requirement:** Duct leakage  $\leq 6\%$ , Fan Efficacy (.58W/CFM), Air Flow  $\geq 350$  CFM/ton (or Standards Table 150.0-C / D alternative)

<input type="checkbox"/> <b>3. All New Ducts with Replacement</b>	<b>Required Compliance Documents to be left on site for Final:</b>
Includes replacing or installing All New Ducts <sup>2</sup> and one or more of the following: Condenser Unit, Evaporator Coil, Furnace	CF1R-ALT-02-E CF2R-MECH-01, MECH-20-HERS, MECH-(23 or 24)-HERS CF3R-MECH-20-HERS, MECH-(23 or 24)-HERS

**Installer Requirement:** Duct leakage  $\leq 6\%$ , Air Flow  $\geq 350$  CFM/ton (or Standards Table 150.0-C / D alternative)  
 Exempted from duct leakage testing | existing duct systems are constructed, insulated or sealed with asbestos.

<input type="checkbox"/> <b>4. New Ducting over 40 feet</b>	<b>Required Compliance Documents to be left on site for Final:</b>
Adding or replacing ducts in unconditioned space but less than All New Ducts <sup>2</sup>	CF1R-ALT-02-E CF2R: MECH-20-HERS CF3R: MECH-20-HERS

**Installer Required to:** Duct leakage ( $\leq 15\%$  or,  $\leq 10\%$  to outside, or seal all accessible leaks)  
 Exempted from duct leakage testing | existing duct systems are constructed, insulated or sealed with asbestos.

<sup>1</sup> All new ducting R-8 required when more than 40 ft installed and R-6 when less than 40 ft installed. This includes in walls, between floors etc.  
<sup>2</sup> A New Duct system is when the duct system is constructed of at least 75 percent new duct material, and up to 25 percent may consist of reused parts from the dwelling unit's existing duct system (e.g., registers, grilles, boots, air handler, plenums, duct material).  
<sup>3</sup> R-5 (1" thick insulation) for linesets 1" and less. R-7.5 (1.5" thick insulation) for linesets over 1 inch. Most mfg will require Suction line Diameter with insulation as the following 1.5-2T-2 $\frac{3}{8}$ ", 2.5-3T-2 $\frac{3}{8}$ ", 3.5 to 4T-2 $\frac{3}{8}$ ", 5T-4 $\frac{3}{8}$ "

**Contractor (Documentation Author's /Responsible Designer's Declaration Statement)**

I certify the following under penalty of perjury, under the laws of the State of California:

- The information provided on this Certificate of Compliance is true and correct.
- I am eligible under Division 3 of the California Business and Professions Code to accept responsibility for the information on this document.
- That the energy features and performance specifications for the design identified on this Certificate of Compliance conform to the requirements of Title 24, Parts 1 and 6 of the California Code of Regulations (CCR).
- That the energy features and performance specifications, materials, components, and manufactured devices for the building design or system design identified on this Certificate of Compliance conform to the requirements of Title 24, Part 1 and Part 6 of the CCR.
- The building design features or system design features identified on this Certificate of Compliance are consistent with the information provided on other applicable compliance documents, worksheets, calculations, plans and specifications submitted to the enforcement agency for approval with this building permit application.

Responsible Designer Name:	Responsible Designer Signature:	Date Signed:	License:
Company :	Address:	City/State/Zip:	Phone:

**ALTERATIONS - HVAC**

CEC-CF1R-ALT-04-E (Revised 06/14)

CALIFORNIA ENERGY COMMISSION



CERTIFICATE OF COMPLIANCE	CF1R-ALT-04-E
Alterations - HVAC CZ 2, and 8-15 (formerly CF-1R-ALT-HVAC) All parts of Contra Costa except West County	(Page 1 of 1)

<b>Site Address:</b>		<b>Enforcement Agency:</b> <b>Contra Costa County DCD</b>		<b>Date Prepared:</b>	<b>Permit#:</b>
Equipment Type		Equipment Efficiency		New Ducting, Plenums, Lineset: Required R-value	Conditioned Floor Area (sq ft)
<input type="checkbox"/> Packaged System	<input type="checkbox"/> Evaporator Coil	_____ AFUE	_____ COP	<input type="checkbox"/> R-6 (CZ 2, 8-13) Ducting	Served by system _____ sqft
<input type="checkbox"/> Split System	<input type="checkbox"/> Condensing Unit	_____ SEER	_____ HSPF	<input type="checkbox"/> R-8 <sup>1</sup> (CZ 11, 14, 15) Ducting	
<input type="checkbox"/> Mini Split	<input type="checkbox"/> Compressor	_____ EER		<input type="checkbox"/> R-6 (all CZ's) Plenums	
<input type="checkbox"/> Furnace	<input type="checkbox"/> Lineset			<input type="checkbox"/> R-5 or R7.5) Lineset <sup>4</sup>	<input type="checkbox"/> Setback (If not already present, must be installed)
	<input type="checkbox"/> TXV				

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<input type="checkbox"/> <b>1. HVAC Changeout/Repair</b>	<b>Required Compliance Documents to be left on site for Final:</b>
All Equipment, Condenser Unit, Evaporator Coil, Compressor, TXV, Lineset, Air Handler/Furnace <sup>2</sup> (Can include new ducting)	CF1R-ALT-02-E CF2R: MECH-01, MECH-20-HERS, MECH-(23 or 24) <sup>2</sup> -HERS, MECH-25-HERS <sup>2</sup> CF3R: MECH-20-HERS, MECH-(23 or 24)-HERS <sup>2</sup> , MECH-25-HERS <sup>2</sup>
<b>Installer Requirement:</b> Duct leakage ( $\leq 15\%$ , or $\leq 10\%$ to outside, or seal all accessible leaks), Air Flow $\geq 300$ CFM/ton, Refrigerant Charge. Exempted from duct leakage testing if: <input type="checkbox"/> 1. Duct system registered with HERS provider as previously sealed, or <input type="checkbox"/> 2. There is less than 40 linear feet of duct in unconditioned space, or <input type="checkbox"/> 3. Existing duct systems are constructed, insulated or sealed with asbestos (list manufacture date of building _____)	
<input type="checkbox"/> <b>2. New HVAC System</b>	<b>Required Compliance Documents to be left on site for Final:</b>
All new equipment and All New Ducts <sup>3</sup> including Mini Split	CF1R-ALT-02-E CF2R: MECH-01, MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS <sup>2</sup> , MECH-25-HERS <sup>2</sup> CF3R: MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS <sup>2</sup> , MECH-25-HERS <sup>2</sup> Mini Splits require CF1R-ALT-02-E, CF2R-MECH-01, and (CF2R-CF3R) MECH-25-HERS
<b>Installer Requirement:</b> Duct leakage $\leq 6\%$ , Fan Efficacy (.58W/CFM), Air Flow $\geq 350$ CFM/ton (or alternative), Refrigerant Charge	
<input type="checkbox"/> <b>3. All New Ducts with Replacement</b>	<b>Required Compliance Documents to be left on site for Final:</b>
All New Ducts <sup>3</sup> and one or more of the following replaced: Condenser Unit, Evaporator Coil, Compressor, TXV, Lineset, Furnace <sup>2</sup>	CF1R-ALT-02-E CF2R: MECH-01, MECH-20-HERS, MECH-(23 or 24)-HERS, MECH-25-HERS CF3R: MECH-20-HERS, MECH-(23 or 24)-HERS, MECH-25-HERS
<b>Installer Requirement:</b> Duct leakage $\leq 6\%$ , Air Flow $\geq 350$ CFM/ton (or alternative), Refrigerant Charge Exempted from duct leakage testing if: <input type="checkbox"/> 1. Existing duct systems are constructed, insulated or sealed with asbestos	
<input type="checkbox"/> <b>4. New Ducting over 40 feet</b>	<b>Required Compliance Documents to be left on site for Final:</b>
New ducting but less than All New Ducts <sup>3</sup>	CF1R-ALT-02-E, CF2R: MECH-20-HERS, CF3R: MECH-20-HERS
<b>Installer Required to:</b> Duct leakage ( $\leq 15\%$ or, $\leq 10\%$ to outside or, or seal all accessible leaks) <input type="checkbox"/> EXCEPTION: Existing duct systems constructed, insulated or sealed with asbestos.	
<sup>1</sup> All new ducting R-8 required when more than 40 ft installed and R-6 when less than 40 ft installed. This includes in walls, between floors etc. <sup>2</sup> Heating only systems and Air Handler/Furnace changes do not require Air Flow MECH-(23 or 24), or Refrigerant Charge verification MECH-25 <sup>3</sup> All New Ducts is when at least 75 percent of the duct system is new duct material, and up to 25 percent may consist of reused parts from the dwelling unit's existing duct system (e.g., registers, grilles, boots, air handler, coil, plenums, duct material) <sup>4</sup> R-5 (1" thick insulation) for linesets 1" and less. R-7.5 (1.5" thick insulation) for linesets over 1 inch. Most mfg will require Suction line Diameter with insulation as the following 1.5-2T-2 <sup>5</sup> / <sub>8</sub> ", 2.5-3T-2 <sup>3</sup> / <sub>4</sub> ", 3.5 to 4T-2 <sup>1</sup> / <sub>2</sub> ", 5T-4 <sup>1</sup> / <sub>2</sub> "	

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- That the energy features and performance specifications, materials, components, and manufactured devices for the building design or system design identified on this Certificate of Compliance conform to the requirements of Title 24, Part 1 and Part 6 of the CCR.
- The building design features or system design features identified on this Certificate of Compliance are consistent with the information provided on other applicable compliance documents, worksheets, calculations, plans and specifications submitted to the enforcement agency for approval with this building permit application.

Responsible Designer Name:	Responsible Designer Signature:	Date Signed:	License:
Company :	Address:	City/State/Zip:	Phone:

**For assistance or questions regarding the Energy Standards, contact the Energy Hotline at: 1-800-772-3300**