HOUSTON
PUBLIC WORKS

INSTRUCTIONS

This form shall be completed and submitted to the field inspector for the following residential projects:

- new construction
- additions
- complete remodels (all interior walls and ceilings are removed, or home square footage is changed)
- complete new ac systems

Please note the form must be presented before the final mechanical inspection can be approved.

CODE INFORMATION

Below is an excerpt from the 2021 International Residential Code pertaining to this requirement:

M1401.3 Equipment and appliance sizing. Heating and cooling equipment and appliances shall be sized in accordance with ACCA Manual S or other approved sizing methodologies based on building loads calculated in accordance with ACCA Manual J or other approved heating and cooling calculation methodologies.

M1601.1 Duct design. Duct systems serving heating, cooling and ventilation equipment shall be installed in accordance with the provisions of this section and ACCA Manual D, the appliance manufacturer's installation instructions or other approved methods.

PROJECT INFORMATION

Address: _____ Project Number: _____

Square Feet: _____ Number of Rooms: _____

HVAC EQUIPMENT SELECTION

Cooling Equipment:	Heating Equipment:
Type: _____ Air Conditioner, Heat Pump	Type: _____ Gas, electric, LP
Model: _____	Model: _____
Serial: _____	Serial: _____
Total Cooling Capacity: _____	Total Heating Output: _____

Total number of systems: _____ (e.g., 1- 3-ton system, 2 -5 ton systems)

ACKNOWLEGEMENT

(Must be completed and signed by the HVAC licensee)

I declare for the above mentioned address the load calculations, equipment selection, and duct design were rigorously performed in accordance with ACCA Manual *J* or other approved heating and cooling calculation methodologies.

I declare for the above mentioned address the duct sizing shall be installed in accordance with ACCA Manual D or other *approved* methods.

Company Name: _____

Printed Licensee's Name: _____ HVAC Contractor License #: _____

Licensee's Signature: _____ Date: _____