



**PALM BEACH COUNTY BUILDING DIVISION**

**DECAL ONLINE PERMIT REGISTRATION APPLICATION  
FOR REPLACEMENT OF  
MECHANICAL UNITS AND WATER HEATERS**

**Building Division Use Only**

D.R # \_\_\_\_\_

Submittal Date \_\_\_\_\_

**CONTRACTOR INFORMATION**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Apt/Bay/Suite # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Contractor License No. \_\_\_\_\_

Qualifier: \_\_\_\_\_  
(PRINT)

Qualifier Signature: \_\_\_\_\_

**TYPE OF WORK ALLOWED**

(Please Check Work for Which Application is Being Made)

**MECHANICAL**

1 & 2 Family Dwelling Air Conditioning Change Outs

**PLUMBING**

1 & 2 Family Dwelling water heater (WH) replacement within or serving individual dwelling unit.

**ELECTRIC**

Minor electric disconnect for water heater and mechanical systems authorized under a decal

For those installations chosen for random inspections, the contractor is responsible for moving appliance or other obstacles and providing necessary access to allow thorough inspection.

**STATE OF FLORIDA  
COUNTY OF PALM BEACH**

Sworn to or affirmed before me by means of  physical presence or  online notarization

this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
(month) (year)

by \_\_\_\_\_, who is  
(Name of Person Acknowledging)

personally known to me or has produced \_\_\_\_\_ as Identification.

\_\_\_\_\_  
(Signature of Notary Public) Notary State of Florida

\_\_\_\_\_  
Name of Notary (typed, printed or stamped)

**OFFICE USE ONLY:**

Number of Inactive permits (past 2010):

\_\_\_\_\_ Primary \_\_\_\_\_ Sub

\_\_\_\_\_ Number of Complete permits

## DECAL PERMIT PROGRAM APPLICATION INSTRUCTIONS

- 1.) Contractor/Qualifier completes The “Contractor Information” portion of form.
- 2.) Contractor applies online – **REQUEST TO REGISTER IN DECAL PROGRAM**
- 3.) The Chief Inspector may require a meeting with Contractor prior to action.
- 4.) Contractors who submit a non-qualifying application will be notified by email. The review fee (50% annual fee) for the application is non-refundable.
- 5.) If approved, the program acceptance letter will be emailed to contractor along with an invoice for the balance due (50% annual fee).
- 6.) Permit program acceptance is administered through the Decal Manager. Cost of Annual Permit program participation is \$250.00.

**NOTE:** State Law requires a certified copy of a recorded Notice of Commencement (NOC) to be filed with the Building Division if work exceeds \$5000, or is equal to or greater than \$15000 for Air Conditioning change outs. For work exceeding these thresholds, contractors are to attach a certified copy of the recorded NOC to the Owner Waiver before sending to the Decal Office. FORMS ARE AVAILABLE IN THE PERMIT CENTER OR VIA WEBSITE: [www.pbcgov.com/pzb/building](http://www.pbcgov.com/pzb/building) .