



**TOWN OF BLUFFTON  
BUILDING PERMIT APPLICATION  
REFRIGERATION SYSTEMS CERTIFICATION**

Growth Management Customer Service Center  
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Refrigeration Systems Certification		
Permit Number:		
Location of Work:		
Owner Name:	Installer Company Name:	
Address:	Installer Address:	
Phone:	Installer Phone:	
Installer's Refrigeration State License Number:		
Refrigerant Details		
Type of Refrigerant:		
Test Pressure of High Side:		
Test Pressure of Low Side:		
Total Refrigerant in System:		
Certification		
<p>Per International Mechanical Code 1108.4 a certificate of test shall be provided for all systems containing 55 pounds (25 kg) or more of refrigerant. The certificate shall give the name of the refrigerant and the field-test pressure applied to the high side and the low side of the system. The certification of test shall be signed by the installer and shall be made part of the public record.</p> <p>In signing this document I affirm all the above is true to the best of my knowledge, and that I understand this information will become part of the permanent job record.</p>		
_____	_____	_____
<b>Installer Name (Please Print)</b>	<b>Signature of Installer</b>	<b>Date</b>