



2015 RESIDENTIAL ENERGY EFFICIENCY CERTIFICATE

Dwelling Address:	Posted Date:
Builder / Registered Design Professional:	Phone:
Contractor Name (or Homeowner as General):	License No:

ENVELOPE SUMMARY

List R-Value and Type for applicable components¹:

Location	R-val	Type of insulation		Location	R-val	Type of insulation
Flat Ceiling				Foundation Exterior		
Roof (slope/vault)				Foundation Interior ²		
Walls				Slab		
Attic Knee wall				Floor - vented crawl space		
Unvented crawl space wall				Floor - cantilever		
Rim/Band Joists				Floor - above garage		
Other insulation				Ducts in unconditioned space		

List Fenestration Components:

Window U-Factor	Window SHGC	Glazed Door U-Factor
Skylight U-Factor	Skylight SHGC	Opaque Door U-Factor

MECHANICAL SUMMARY

Heating System:	Mfr:	Model:			Input btu's:	Calc. Heat Loss:
	Type	GAS: AFUE	AIR-SOURCE HEAT PUMP:	HSPF	Electric Furnace	Baseboard Electric Heater
Cooling System:	Mfr:	Model:			Output Tons:	Calc. Heat Gain: btu
	Type	(i.e. DX Standard/Split, Heat Pump, Geo Thermal, etc.)				Calc. Cooling Load: btu
	Efficiency rating:	SEER	EER	Other:	Coolant Type:	
Water Heater:	Mfr:	Model:				Gallon Capacity:
	Overall Energy Factor:	Ef	Fuel Type:	Gas	Electric	Other:
Mechanical Ventilation System:	HRV:	Low CFM	High CFM		Continuous Exhausting Fan Rated Capacity :	CFM
	ERV:	Low CFM	High CFM		Capacity Continuous Ventilation Rate:	CFM
	Fan Locations:					Total Ventilation (intermittent+continuous):
Make-up Air System:	Type:	Passive	Powered	Interlocked with Exhaust Device	Not Required	Other:
	Size:	inch	Round Duct	Metal Duct	Location:	CFM
Combustion Air System:	Type:	Passive	Not Required	Other:		
	Size =	inch	Round Duct	Metal Duct	Location:	CFM
Radon:	Active System		Passive System	Fan Location:		
Duct Testing:	Rough-in (<3 cfm if no air handler)	cfm per 100 sqft.			Post Construction =	cfm per 100 sqft.
	Not Required (ducts and air handlers within conditioned space)				Tested By:	

BUILDING THERMAL ENVELOPE TESTING

Fan flow CFM @ 50 Pa:	X	60	/	Total Conditioned Volume Cubic Feet:	=	Air leakage rate of:	Air Changes per Hour
Testing conducted by:						Phone:	

1 = Where there is more than one value for a listed component the certificate shall list the value covering the largest area.
 2 = R11 maximum unless closed cell foam, or R19 for Permanent Wood Foundation.
 3 = Based on ACCA Manual J or other approved method.

*Per R401.3: A completed copy of this certificate shall be presented to the Village of Flower Hill Building Department prior to inspection for occupancy.