

ENERGY EFFICIENCY CERTIFICATE

Builder, Permit Holder or Registered Design Professional
Print Name:

Signature:

Property Address:

Date:

**Insulation Rating - List the value covering
largest area to all that apply**

R-Value

Ceiling/roof:

R-

Wall:

R-

Floor:

R-

Closed Crawl Space Wall:

R-

Closed Crawl Space Floor:

R-

Slab:

R-

Basement Wall:

R-

Fenestration:

U-Factor

Solar Heat Gain Coefficient (SHGC)

Building Air Leakage

Visually inspected according to 402.4.2.1 OR

Building Air Leakage Test Results
(Sec. 402.4.2.2)
ACH50 [Target: 5.0] or
CFM50/SFSA [Target: 0.30]

Name of Tester/Company:

Date:

Phone:

Ducts:

Insulation

R-

Total Duct Leakage Test Result (Sect. 403.2.2)
(CFM25 Total/100SF) [Target: 6]

Name of Tester or Company:

Date:

Phone:

Certificate to be displayed permanently