|  |  |
| --- | --- |
| ENERGY COMPLIANCE CERTIFICATE  Project Name:  Address:  Permit Number:  Builder: | |
| INSULATION RATINGS (list R-value of predominant area of component) | ENTER R-VALUE or  N/A (does not apply) |
| Ceiling/Roof |  |
| Ducts in attic |  |
| Ducts in unconditioned space |  |
| Floor, cavity |  |
| Floor, underslab |  |
| Slab edge (indicate heated slab? Y / N) |  |
| Wall (cavity or cavity/continuous) |  |
| FENESTRATION | ENTER U-VALUE |
| Predominant value of fenestration |  |
| EQUIPMENT EFFICIENCIES | AFUE or EER or  N/A (does not apply |
| Heating |  |
| Cooling |  |
| Service water heating |  |
| OTHER HEATING EQUIPMENT |  |
| Gas-fired unvented room heater(s) | YES  / NO |
| Electric furnace | YES  / NO |
| Baseboard electric heater(s) | YES  / NO |
| COMPLIANCE METHOD | Check (√) compliance method |
| Prescriptive (Table 1102.1) |  |
| AU trade-off / Total AU trade off (circle method) |  |
| Performance (tool used      ) |  |
| Name of person completing certificate:  Printed name: | Title: |
| Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date:       /     / |