# Residential Duct & Envelope Testing (DET) Certification Form

Use this form to provide test results and certify the DET performed on your property.

## Property Address
Enter the house location.

<table>
<thead>
<tr>
<th>Property Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
</tr>
</tbody>
</table>

## Owner/Owner’s Agent
Provide the contact information for the owner/owner’s agent and the associated permit number.

<table>
<thead>
<tr>
<th>Owner/Owner’s Agent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Email</td>
</tr>
</tbody>
</table>

## Building Envelope Air Leakage Information
Use this section to provide details about the mandatory Building Envelope Air Leakage testing.

(a) Provide the results of the mandatory Blower Door Test.

(b) Confirm the mandatory Visual Inspection.

(c) The testing company responsible for performing the testing/inspection must complete this section.

### (a) Blower Door Test Results

- Fan Flow at 50 Pascals = \( \text{CFM50} \)
- Total Conditioned Volume = \( \text{ Volume } \) ft\(^3\)
- \( \text{ACH50} = \text{CFM50} \times 60 / \text{Volume} \) = \( \text{ACH50} \) ft\(^-1\) h

### (b) Visual Inspection

- Air Barrier and Insulation Installation Final Inspection Checklist (on reverse) has been completed and signed.

### (c) Testing Company Information

- Testing Company: ________________
- Tester Name: ________________
- Email: ________________
- Phone: ________________
- Tester Signature: ________________ Date: ________________

- BPI or HERS Certification #: ________________
- BPI #: ________________
- HERS Rater #: ________________
- HERS RFI #: ________________

## Heating and Cooling System Duct Leakage Information
Use this section to provide details about the Heating and Cooling System Duct Leakage testing.

(a) If testing is not required (based on the ducts’ location), check the box to certify, then sign.

(b) Check the box to indicate: i) energy code compliance path and ii) type of test performed.

(c) Provide the results of the Duct Leakage Test.

(d) The testing company responsible for performing the testing/inspection must complete this section.

### (a) Duct Certification

- I certify that all portions of the ducts are located entirely within the building thermal envelope. Testing is not required.

- Owner/owner’s representative signature: ________________ Date: ________________

### (b) Total Duct Leakage Test

- i) Energy code compliance path: [ ] Prescriptive (including REBCheck) [ ] Performance or Energy Rating Index

- ii) Type of test performed: [ ] Rough-in with air handler [ ] Rough-in without air handler [ ] Post construction

### (c) Test Results

- **System 1**: Fan Flow at 25 Pascals (CFM25) = \( \text{CFM} \)
- Conditioned Floor Area (CFA) served by system = \( \text{ft}^2 \)

  \[ \text{CFM25} / \text{CFA} \times 100 = \text{CFM/100 ft}^2 \]

- **System 2 (if present)**: Fan Flow at 25 Pascals (CFM25) = \( \text{CFM} \)

- Conditioned Floor Area (CFA) served by system = \( \text{ft}^2 \)

  \[ \text{CFM25} / \text{CFA} \times 100 = \text{CFM/100 ft}^2 \]

### (d) Testing Company Information

- Testing Company: ________________
- Tester Name: ________________
- Email: ________________
- Phone: ________________
- Tester Signature: ________________ Date: ________________

- BPI or HERS Certification #: ________________
- BPI #: ________________
- HERS Rater #: ________________
- HERS RFI #: ________________

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Qualified professionals may be found at:

- [https://peconewhomes.com/builders/find-participating-raters/](https://peconewhomes.com/builders/find-participating-raters/)
- [http://www.bpi.org/sites/default/files/Locator.html](http://www.bpi.org/sites/default/files/Locator.html)

Residential Duct & Envelope Testing Certification Form (May 2019)
# Air Barrier and Insulation Installation Final Inspection Checklist

## Property Address
Enter the house location.

1. Address

## Owner/Owner’s Agent
Provide the contact information for the owner/owner’s agent and the associated permit number.

2. Name
   Permit Number

   Email
   Phone

## Final Inspection Details
Check each box to confirm all inspections were performed. Use the lines to provide any additional details about the inspection.

<table>
<thead>
<tr>
<th>Final Inspection</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐</td>
<td>Recessed light fixtures installed in the building thermal envelope are sealed to the drywall.</td>
</tr>
<tr>
<td>☐</td>
<td>Insulation is installed in each ceiling assembly that separates conditioned space from unconditioned space or outdoors.</td>
</tr>
<tr>
<td>☐</td>
<td>Insulation R-value is R-49 or greater.¹ (A minimum of R-38 insulation is allowed if the full height of uncompressed insulation extends over the top of the walls.)</td>
</tr>
<tr>
<td>☐</td>
<td>Access openings, drop down stairs, or knee wall doors to unconditioned attic spaces are sealed.</td>
</tr>
</tbody>
</table>

¹ Exception: Values match those listed in an approved REScheck, Simulated Performance, or ERI report.

## Notes:

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## Testing Company
The testing company responsible for performing the inspection must complete this section.

3. Testing Company
   Tester Name

   Email
   Phone

   Tester Signature
   Date

   BPI or HERS Certification #: BPI #: _______ HERS Rater #: _______ HERS RFI #: _______