



BUILDING INSPECTIONS

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TABLE 401.9 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/Company:	
Date:	Phone:
Certificate to be displayed permanently	