



This completed form is required for all New 1 & 2 Family Dwellings, Townhouses and all mechanical projects that include installing and or replacing duct systems for the same type of dwellings.

Job Address: _____ Builder Name _____ Date: _____

Final results: Duct Leakage Pass Fail Envelope leakage Pass Fail

DUCT LEAKAGE TESTING VERIFICATION

Conditioned Floor Area (sq.ft): _____ Max leakage _____ Source Plans Measured Builder

Choose option used for compliance: per 2015 IECC Section R403.3.4, system tested @ 25 Pascals across, including the manufacturer's air handler enclosure. **Multiple HVAC units are tested separately and require separate forms.**

- Rough-In Test Option duct leakage (floor area sq ft X .04= _____) was _____ CFM (with airhandler)**
- Rough-In Test Option duct leakage (floor area sq ft X .03= _____) was _____ CFM (with/out airhandler)**
- Post Construction Option duct leakage (floor area sq ft X .04= _____) was _____ CFM.**

I certify that I have conducted a duct leakage test and it has passed the requirements of the 2015 International Energy Conservation Code. I further certify that I am certified to perform duct testing leakage testing certified by national or state organizations as approved by the building official. I certify I am an independent third-party entity, and have not installed the HVAC system; nor am I employed or have any financial interest in the company that constructs the structure.

Certification Number: Agency: _____

Signature of Inspector/Testing Technician: _____

Printed Name of Inspector/Testing Technician: _____

BUILDING THERMAL ENVELOPE LEAKAGE TESTING VERIFICATION

Compliance requirements: per 2015 IECC Section R402.4.1.2, building thermal envelope tested @ 50 Pascals in accordance with ASTM E 779 or ASTM E1827 to verify air leakage.

Calculations: Sq Ft _____ Volume: _____ CFM@50 _____ CFH@50 _____

Building Thermal Envelope Leakage Testing: Results of test: _____ air changes per hour. (5 ACH max)

I certify that I have conducted an air leakage test and it has passed the requirements of the 2015 International Energy Conservation Code. I further certify that I am certified to perform air infiltration testing certified by national or state organizations as approved by the building official. I certify I am an independent third-party entity, nor am I employed or have any financial interest in the company that constructs the structure.

Certification Number: Agency: _____

Signature of Inspector/Testing Technician: _____

Printed Name of Inspector/Testing Technician: _____

This form shall be on site for final inspection