City of NRH Texas 2018 IECC Commercial Energy Compliance Certificate Path

PROVIDE THIS FORM AT FINAL INSPECTION

Department of Development Services Building Inspections

Permit Address: _____ Permit #: _____

AIR LEAKAGE - BUILDING THERMAL ENVELOPE VERIFICATION

☐ The thermal envelope of the building complies with sections C402.5.1 through C402.5.11.1.

☐**OR** the Building Thermal Envelope shall be tested in accordance with C402.5.2 (max 0.30cfm/ft^2 with a pressure differential of 0.2 inch water gauge-50Pa) OR C402.5.3(max 0.40cfm/ft^2 with a pressure differential of 0.3 inch water gauge-75Pa).

CFM Rate _____ Square Feet tested_____ CFM/FT^2_____

I certify that the thermal envelope complies with section C402.5.1 through C402.5.11.1, or I have conducted an air leakage test and it has passed the requirements of the 2018 International Energy Conservation Code. I further state that I am certified to perform air infiltration testing 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.

Print Name: _____ Certification Number: _____
Tester Signature: _____ Phone#_____ Date: _____

PROPER INSULATION VALUES AT ROUGH: YES / NO **DAYLIGHT CONTROLS: YES / NO**

HOT WATER PIPE INSULATION: YES / NO **DATE OF ROUGH INSPECTION: _____**

Does this project require commissioning?

☐ **YES-** complete 2nd page. Construction documents shall clearly indicate provisions for commissioning and completion requirements in accordance with section C408.2 and are permitted to refer to specifications for further requirements.

☐ **NO-** Mechanical systems where the total mechanical equipment capacity is less than 480,000 Btuh cooling capacity and 600,000 Btuh combined capacity service water-heating and space-heating systems **OR** system serves sleeping/dwelling units.

COMPLIANCE STATEMENT

This statement concedes that all plan reviews, inspections, and testing of the above project are in compliance with the commercial provisions of the 2018 IECC, as amended, for the selected compliance approach:

- ☐ **Option 1- IECC Prescriptive** (may use COMcheck to show compliance)
- ☐ **Option 2- Total Building Performance –** provide supporting documents showing building energy cost is less than 80% of standard reference design.
- ☐ **Option 3A- Prescriptive: ASHRAE 90.1 (2019)** (may use COMcheck to show compliance)
- ☐ **Option 3B- ASHRAE 90.1 (20139) Energy Cost Budget Method** Section 11

Print Name: _____ Certification Number: _____

Tester Signature: _____ Phone #_____ Date: _____

PROVIDE THIS FORM AT FINAL INSPECTION TO YOUR PERMIT PORTAL BEFORE CALLING BUILDING FINAL

COMMISSIONING COMPLIANCE CHECKLIST (adapted from 2015/2018/2021/2024 IECC)

Project Name: _____

Project Address: _____ Permit Number: _____

Commissioning Provider (CxP): _____

Company/CxP address: _____

ITEM	COMMISSIONING DOCUMENTATION	APPROVAL
1.	**Project Commissioning Requirements**	
	Project commissioning requirements included in project contract documents.	
2.	**Commissioning Plan**	
	Commissioning Plan with checklists (before start of functional testing) completed. (Section C408.2.1)	
3.	**Commissioning Plan Utilized**	
	Commissioning Plan was used during construction and includes items required in Section 408.2.1	
4.	**Systems Adjusting and Balancing**	
	Systems Adjusting and Balancing has been completed	
5.	**HVAC Equipment**	
	HVAC Equipment Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on _____	
6.	**HVAC Controls**	
	HVAC Controls Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on _____	
7.	**Economizers**	
	Economizer Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on _____	
8.	**Lighting Controls**	
	Lighting Controls Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on_____	
9.	**Service Water Heating**	
	Service Water Heating Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on _____	
10.	**Systems Manual**	
	Project documentation, and Systems and O&M Manual, and training completed or scheduled.	
11.	**Commissioning Report**	
	Preliminary Commissioning Report submitted to Owner and includes all items required in C408.2.4	

Owner/Owner's Representative Acknowledgement

I hereby certify that the commissioning provider has provided me with evidence of mechanical, service water heating and lighting systems commissioning in accordance with the 2018 IECC.

Name/Company: _____

☐ Owner ☐ Owner's Representative

Signature: _____ Date: _____