

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Envelope Leakage Test Report

Project Name: Sample Addition Street: 346 Main Street City, State, Zip: Orlando, FL, 32922- Owner: OWNER Design Location: FL, Orlando	Builder Name: BUILDER Permit Office: Permit Number: Jurisdiction:
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Envelope Leakage Test Results

Regression Data:

C: _____ n: _____ R: _____

Multi Point Test Data:

	HOUSE PRESSURE	FLOW:
1	Pa	cfm
2	Pa	cfm
3	Pa	cfm
4	Pa	cfm
5	Pa	cfm
6	Pa	cfm

Leakage Characteristics

CFM(50): _____

ELA: _____

EqLA: _____

ACH: _____

ACH(50): _____

SLA: _____

402.4.2.1 Testing option. Building envelope tightness and insulation installation shall be considered acceptable when tested air leakage is less than seven air changes per hour (ACH) when tested with a blower door at a pressure of 33.5 psf (50 Pa). Testing shall occur after rough in and after installation of penetrations of the building envelope, including penetrations for utilities, plumbing, electrical, ventilation and combustion appliances.

During testing:

1. Exterior windows and doors, fireplace and stove doors shall be closed, but not sealed;
2. Dampers shall be closed, but not sealed, including exhaust, intake, makeup air, backdraft and flue dampers;
3. Interior doors shall be open;
4. Exterior openings for continuous ventilation systems and heat recovery ventilators shall be closed and sealed;
5. Heating and cooling system(s) shall be turned off;
6. HVAC ducts shall not be sealed; and
7. Supply and return registers shall not be sealed.

I hereby certify that the above envelope leakage performance results demonstrate compliance with Florida Energy Code requirements in accordance with Section Table B-1.1.2.

Signature: _____

Printed Name: _____

Florida Rater Certification #: _____

DATE: _____

Florida Building Code requires testing to confirm envelope leakage be performed by a Class 1 Florida Energy Gauge Certified Energy Rater. Certified Florida Class 1 raters can be found at: <http://energygauge.com/search.htm>



BUILDING OFFICIAL: _____

DATE: _____