

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: Thomas Residence Street: City, State, Zip: , FL, Owner: Design Location: FL, Gainesville	Builder Name: Permit Office: Permit Number: Jurisdiction: County: Columbia(Florida Climate Zone 2)
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Glass/Floor Area: 0.157 Total Proposed Modified Loads: 79.50
 Total Baseline Loads: 93.47

NOTE: Proposed residence must have annual total normalized Modified Loads that are less than or equal to 95 percent of the annual total loads of the standard reference design in order to comply.

PASS

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: _____

DATE: 9-8-25

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: _____
 DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL: _____
 DATE: _____

- Compliance requires certification by the air handler unit manufacturer that the air handler enclosure qualifies as certified factory-sealed in accordance with R403.3.2.1.
- Compliance with a proposed duct leakage Qn requires a PERFORMANCE Duct Leakage Test Report confirming duct leakage to outdoors, tested in accordance with ANSI/RESNET/ICC 380, is not greater than 0.030 Qn for whole house.
- Compliance requires an Air Barrier and Insulation Inspection Checklist in accordance with R402.4.1.1 and this project requires a PERFORMANCE envelope leakage test report with envelope leakage no greater than 7.00 ACH50 (R402.4.1.2).

INPUT SUMMARY CHECKLIST REPORT

PROJECT			
Title:	Thomas Residence	Address type:	Street Address
Building Type:	User	Bedrooms:	5
Owner:		Conditioned Area:	3371
Builder Home ID:		Total Stories:	2
Builder Name:		Worst Case:	No
Permit Office:		Rotate Angle:	0
Jurisdiction:		Cross Ventilation:	
Family Type:	Detached	Whole House Fan:	
New/Existing:	New (From Plans)	Terrain:	Rural
Year Construct:	2025	Shielding:	Moderate/Rural
Comment:			

CLIMATE										
<input checked="" type="checkbox"/> Design Location	Tmy Site	Design Temp	97.5%	2.5%	Int Design Temp	Winter	Summer	Heating Degree Days	Design Moisture	Daily temp Range
<input type="checkbox"/> FL, Gainesville	FL_GAINESVILLE_REGIONA	32	92		70	75	1305.5	51		Medium

BLOCKS			
<input checked="" type="checkbox"/> Number	Name	Area	Volume
<input type="checkbox"/> 1	Block1	1436	12924 cu ft
<input type="checkbox"/> 2	Block2	884	7956 cu ft
<input type="checkbox"/> 3	Block3	1051	9459 cu ft

SPACES									
<input checked="" type="checkbox"/> Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Finished	Cooled	Heated
<input type="checkbox"/> 1	1st Floor	1436	12924	Yes	10	1	Yes	Yes	Yes
<input type="checkbox"/> 2	2nd Floor	1051	9459	No	6	3	Yes	Yes	Yes
<input type="checkbox"/> 3	Master Bedroom	884	7956	No	2	1	Yes	Yes	Yes

FLOORS (Total Exposed Area = 2320 sq.ft.)											
<input checked="" type="checkbox"/> #	Floor Type	Space	Exposed Perim(ft)	Area	R-Value Perim.	U-Factor Joist	Slab Insul. Vert/Horiz	Tile	Wood	Carpet	
<input type="checkbox"/> 1	Slab-On-Grade Edge Ins	1st Floor	101	1436 sqft	0.0	---	0.563	0 (ft)/0 (ft)	0.20	0.60	0.20
<input type="checkbox"/> 2	Floor Over Other Space	2nd Floor	---	1051 sqft	---	0.0	0.219	-----	0.10	0.25	0.65
<input type="checkbox"/> 3	Slab-On-Grade Edge Ins	Master Bedroom	136	884 sqft	0.0	---	0.547	0 (ft)/0 (ft)	0.25	0.00	0.75

ROOF													
<input checked="" type="checkbox"/> #	Type	Materials	Roof Area	Gable Area	Framing. Fract.	Roof Color	Rad Barr	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
<input type="checkbox"/> 1	Gable or shed	Metal	2788 ft²	774 ft²	0.11	Unf, Gal.	N	0.7	No	0.7	No	38	33.69

ATTIC						
<input checked="" type="checkbox"/> #	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
<input type="checkbox"/> 1	No attic	Unvented	0	2320 ft²	N	N

INPUT SUMMARY CHECKLIST REPORT

CEILING										(Total Exposed Area = 3371 sq.ft.)			
✓ #	Ceiling Type	Space	R-Value	Ins. Type	Area	U-Factor	Framing Frac.	Truss Type					
___ 1	Single assembly, no airspace(Unvented)	1st Floor	0.0	Blown	1436.0ft²	0.025	0.11	Wood					
___ 2	Single assembly, no airspace(Unvented)	2nd Floor	0.0	Blown	1051.0ft²	0.025	0.11	Wood					
___ 3	Single assembly, no airspace(Unvented)	Master Bedroom	30.0	Blown	884.0ft²	0.015	0.11	Wood					

WALLS										(Total Exposed Area = 3489 sq.ft.)			
✓ #	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft In	Height Ft In	Area sq.ft.	U-Factor	Sheath R-Value	Frm. Frac.	Solar Absor.	Below Grade
___ 1	N	Exterior	Frame - Wood	1st Floor	13.0	26.0 0	9.0 0	234.0	0.084		0.23	0.75	0 %
___ 2	E	Exterior	Frame - Wood	1st Floor	13.0	3.0 0	9.0 0	27.0	0.084		0.23	0.75	0 %
___ 3	N	Exterior	Frame - Wood	1st Floor	13.0	19.0 8	19.0 6	383.5	0.084		0.23	0.75	0 %
___ 4	W	Exterior	Frame - Wood	Master Bedroom	13.0	11.0 0	9.0 0	99.0	0.084		0.23	0.75	0 %
___ 5	N	Exterior	Frame - Wood	Master Bedroom	13.0	20.0 8	9.0 0	186.0	0.084		0.23	0.75	0 %
___ 6	E	Exterior	Frame - Wood	Master Bedroom	13.0	35.0 0	9.0 0	315.0	0.084		0.23	0.75	0 %
___ 7	S	Exterior	Frame - Wood	Master Bedroom	13.0	8.0 0	9.0 0	72.0	0.084		0.23	0.75	0 %
___ 8	W	Exterior	Frame - Wood	Master Bedroom	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 9	S	Exterior	Frame - Wood	Master Bedroom	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 10	W	Exterior	Frame - Wood	Master Bedroom	13.0	2.0 0	9.0 0	18.0	0.084		0.23	0.75	0 %
___ 11	S	Exterior	Frame - Wood	1st Floor	13.0	10.0 8	9.0 0	96.0	0.084		0.23	0.75	0 %
___ 12	E	Exterior	Frame - Wood	1st Floor	13.0	2.0 0	9.0 0	18.0	0.084		0.23	0.75	0 %
___ 13	S	Exterior	Frame - Wood	1st Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 14	W	Exterior	Frame - Wood	1st Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 15	S	Exterior	Frame - Wood	1st Floor	13.0	22.0 0	9.0 0	198.0	0.084		0.23	0.75	0 %
___ 16	W	Garage	Frame - Wood	1st Floor	13.0	27.0 0	9.0 0	243.0	0.084		0.23	0.75	0 %
___ 17	N	1st Floor	Interior Fr. Wood	2nd Floor	13.0	12.0 0	9.0 0	108.0	0.085		0.23	0.75	0 %
___ 18	W	Exterior	Frame - Wood	2nd Floor	13.0	5.0 4	9.0 0	48.0	0.084		0.23	0.75	0 %
___ 19	E	Exterior	Frame - Wood	2nd Floor	13.0	3.0 0	9.0 0	27.0	0.084		0.23	0.75	0 %
___ 20	N	1st Floor	Interior Fr. Wood	2nd Floor	13.0	22.0 9	9.0 0	204.8	0.085		0.23	0.75	0 %
___ 21	E	Exterior	Frame - Wood	2nd Floor	13.0	18.0 8	9.0 0	168.0	0.084		0.23	0.75	0 %
___ 22	S	Exterior	Frame - Wood	2nd Floor	13.0	8.0 0	9.0 0	72.0	0.084		0.23	0.75	0 %
___ 23	W	Exterior	Frame - Wood	2nd Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 24	S	Exterior	Frame - Wood	2nd Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 25	W	Exterior	Frame - Wood	2nd Floor	13.0	2.0 0	9.0 0	18.0	0.084		0.23	0.75	0 %
___ 26	S	Exterior	Frame - Wood	2nd Floor	13.0	10.0 8	9.0 0	96.0	0.084		0.23	0.75	0 %
___ 27	W	Exterior	Frame - Wood	2nd Floor	13.0	2.0 0	9.0 0	18.0	0.084		0.23	0.75	0 %
___ 28	S	Exterior	Frame - Wood	2nd Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 29	W	Exterior	Frame - Wood	2nd Floor	13.0	12.0 8	9.0 0	114.0	0.084		0.23	0.75	0 %
___ 30	S	Exterior	Frame - Wood	2nd Floor	13.0	8.0 0	9.0 0	72.0	0.084		0.23	0.75	0 %
___ 31	W	Exterior	Frame - Wood	2nd Floor	13.0	18.0 8	9.0 0	168.0	0.084		0.23	0.75	0 %

DOORS										(Total Exposed Area = 135 sq.ft.)			
✓ #	Ornt	Adjacent To	Door Type	Space	Storms	U-Value	Width Ft In	Height Ft In	Area				
___ 1	N	Exterior	Insulated	1st Floor	None	0.46	3.00 0	6.00 8	20.0ft²				
___ 2	N	Exterior	Insulated	1st Floor	None	0.46	6.00 0	8.00 0	48.0ft²				
___ 3	W	Exterior	Insulated	Master Bedroom	None	0.46	3.00 0	6.00 8	20.0ft²				
___ 4	S	Exterior	Insulated	1st Floor	None	0.46	4.00 0	6.00 8	26.7ft²				
___ 5	W	Garage	Insulated	1st Floor	None	0.46	3.00 0	6.00 8	20.0ft²				

INPUT SUMMARY CHECKLIST REPORT

WINDOWS																	(Total Exposed Area = 529 sq.ft.)			
✓ #	Ornt	Wall ID	Frame	Panes	NFRC U-Factor	SHGC	Imp	Storm	Total Area (ft²)	Same Units	Width (ft)	Height (ft)	--Overhang-- Depth (ft) Sep. (ft)		Interior Shade	Screen				
___ 1	N	1	Vinyl	Low-E Double	Y	0.26	0.20	N	N	54.0	3	3.00	6.00	9.5	1.3	None	None			
___ 2	N	3	Vinyl	Low-E Double	Y	0.26	0.20	N	N	54.0	3	3.00	6.00	14.5	1.3	None	None			
___ 3	N	3	Vinyl	Low-E Double	Y	0.26	0.20	N	N	90.0	3	5.00	6.00	14.5	1.3	None	None			
___ 4	N	5	Vinyl	Low-E Double	Y	0.26	0.20	N	N	54.0	3	3.00	6.00	1.5	1.3	None	None			
___ 5	E	6	Vinyl	Low-E Double	Y	0.26	0.20	N	N	20.0	2	2.00	5.00	1.5	1.3	None	None			
___ 6	S	7	Vinyl	Low-E Double	Y	0.26	0.20	N	N	20.0	1	4.00	5.00	1.5	1.3	None	None			
___ 7	S	9	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	9.5	1.3	None	None			
___ 8	S	13	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	9.5	1.3	None	None			
___ 9	W	14	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	9.5	1.3	None	None			
___ 10	S	15	Vinyl	Low-E Double	Y	0.26	0.20	N	N	12.0	1	4.00	3.00	1.5	1.3	None	None			
___ 11	S	15	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	1.5	1.3	None	None			
___ 12	S	22	Vinyl	Low-E Double	Y	0.26	0.20	N	N	15.0	1	3.00	5.00	1.5	1.3	None	None			
___ 13	S	24	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	1.5	1.3	None	None			
___ 14	S	26	Vinyl	Low-E Double	Y	0.26	0.20	N	N	15.0	1	3.00	5.00	1.5	1.3	None	None			
___ 15	S	28	Vinyl	Low-E Double	Y	0.26	0.20	N	N	30.0	2	3.00	5.00	1.5	1.3	None	None			
___ 16	S	30	Vinyl	Low-E Double	Y	0.26	0.20	N	N	15.0	1	3.00	5.00	1.5	1.3	None	None			

INFILTRATION										
✓ #	Scope	Method	SLA	CFM50	ELA	EqLA	ACH	ACH50	Space(s)	Infiltration Test Volume
___ 1	Wholehouse	Proposed ACH(50)	0.00040	3540	194.19	364.57	0.1897	7.0	All	30339 cu ft

GARAGE									
✓ #	Floor Area	Length	Width	Roof Area	Exposed Perimeter	Area Under Uncond.	Avg. Wall Height	Exposed Wall Insulation	
___ 1	648 ft²	24.0 ft²	27.0 ft²	648 ft²	75 ft	648 ft	9 ft	1	

MASS						
✓ #	Mass Type	Area	Thickness	Furniture Fraction	Space	
___ 1	Default(8 lbs/sq.ft.)	0 ft²	0 ft	0.30	1st Floor	
___ 2	Default(8 lbs/sq.ft.)	0 ft²	0 ft	0.30	2nd Floor	
___ 3	Default(8 lbs/sq.ft.)	0 ft²	0 ft	0.30	Master Bedroom	

HEATING SYSTEM											
✓ #	System Type	Subtype/Speed	AHRI #	Efficiency	Capacity kBTu/hr	---Geothermal HeatPump---			Ducts	Block	
						Entry	Power	Volt	Current		
___ 1	Electric Heat Pump	None/Single		HSPF2: 7.50	36.0		0.00	0.00	0.00	sys#1	1
___ 2	Electric Heat Pump	None/Single		HSPF2: 7.50	18.0		0.00	0.00	0.00	sys#2	2
___ 3	Electric Heat Pump	None/Single		HSPF2: 7.50	30.0		0.00	0.00	0.00	sys#3	3

COOLING SYSTEM									
✓ #	System Type	Subtype/Speed	AHRI #	Efficiency	Capacity kBTu/hr	Air Flow cfm	SHR	Duct	Block
___ 1	Central Unit	None/Single		SEER2:15.0	36.0	1080	0.75	sys#1	1
___ 2	Central Unit	None/Single		SEER2:15.0	18.0	540	0.75	sys#2	2
___ 3	Central Unit	None/Single		SEER2:15.0	30.0	900	0.75	sys#3	3

INPUT SUMMARY CHECKLIST REPORT

HOT WATER SYSTEM

√ #	System Type	Subtype	Location	EF(UEF)	Cap	Use	SetPnt	Fixt. Flow	Trap	Pipe Ins.	Pipe length
___ 1	Propane	Tankless	Exterior	0.59 (0.59)	1.0 gal	80 gal	120 deg	Standard	Yes	None	99
	Recirculation System	Recirc Control Type	Loop length	Branch length	Pump power	DWHR	Facilities Connected	Equal Flow	DWHR Eff	Other Credits	
___ 1	No		NA	NA	NA	No	NA	NA	NA	None	

DUCTS

√ Duct #	-----Supply----- Location	R-Value	Area	-----Return----- Location	R-Value	Area	Leakage Type	AHU Location	CFM 25 TOT OUT	QN OUT	AHU SEALED	RLF	HVAC # Heat Cool
___ 1	1st Floor	6.0	225 ft²	1st Floor	6.0	56 ft²	Prop. Leak Free	1st Floor	--- ---	0.030	Yes	0.50	1 1
___ 2	Master Bedroo	6.0	225 ft²	Master Bedroo	6.0	56 ft²	Prop. Leak Free	Master Bed	--- ---	0.030	Yes	0.50	2 2
___ 3	2nd Floor	6.0	225 ft²	2nd Floor	6.0	56 ft²	Prop. Leak Free	2nd Floor	--- ---	0.030	Yes	0.50	3 3

TEMPERATURES

Programable Thermostat: Y				Ceiling Fans: N									
Cooling	<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input type="checkbox"/> Nov	<input type="checkbox"/> Dec	
Heating	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Venting	<input type="checkbox"/> Jan	<input type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input type="checkbox"/> May	<input type="checkbox"/> Jun	<input type="checkbox"/> Jul	<input type="checkbox"/> Aug	<input type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input type="checkbox"/> Dec	
√ Thermostat Schedule: HERS 2006 Reference	Hours												
Schedule Type	1	2	3	4	5	6	7	8	9	10	11	12	
___ Cooling (WD)	AM PM	78 80	78 80	78 80	78 80	78 78	78 78	78 78	78 78	80 78	80 78	80 78	80 78
___ Cooling (WEH)	AM PM	78 80	78 80	78 80	78 80	78 78	78 78	78 78	78 78	80 78	80 78	80 78	80 78
___ Heating (WD)	AM PM	65 68	65 68	65 68	65 68	65 68	65 68	65 68	65 68	68 68	68 68	68 68	68 68
___ Heating (WEH)	AM PM	65 68	65 68	65 68	65 68	65 68	65 68	65 68	65 68	68 68	68 68	68 68	68 68