
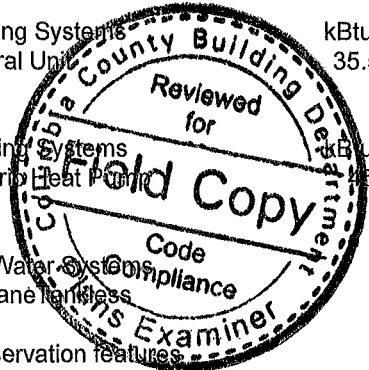


FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

<p>Project Name: Moss Residence Street: City, State, Zip: Lake City, FL, 32055 Owner: Moss Design Location: FL, Gainesville</p>	<p>Builder Name: Gibraltar Contracting LLC Permit Office: Columbia County Permit Number: Jurisdiction: County: Columbia(Florida Climate Zone 2)</p>																																																																																																																																										
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<p>Glass/Floor Area: 0.126 Total Proposed Modified Loads: 68.28 Total Baseline Loads: 72.60</p>																																																																																																																																											
<p>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</p>																																																																																																																																											
<p>I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code</p> <p>PREPARED BY: <u>William C. [Signature]</u></p> <p>DATE: <u>2 / 10 / 2025</u></p> <p>I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.</p> <p>OWNER/AGENT: _____</p> <p>DATE: _____</p>	<p>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.</p> <div style="text-align: right;">  </div> <p>BUILDING OFFICIAL: _____</p> <p>DATE: _____</p>																																																																																																																																										



- 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.
- Default duct leakage does not require a Duct Leakage Test Report.
- 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:	Moss Residence	Bedrooms	4	Address type	Lot								
Building Type	User	Conditioned Area	2936	Lot #	29								
Owner	Moss	Total Stories	1	Block/SubDivision	Cobblestone								
Builder Home ID		Worst Case	No	PlatBook									
Builder Name	Gibraltar Contracting LLC	Rotate Angle	0	Street									
Permit Office	Columbia County	Cross Ventilation	Yes	County	Columbia								
Jurisdiction		Whole House Fan	No	City, State, Zip	Lake City, FL, 32055								
Family Type	Detached	Terrain	Suburban										
New/Existing	New (From Plans)	Shielding	Suburban										
Year Construct	2025												
Comment													
CLIMATE													
✓ Design Location	Tmy Site	Design Temp	97 5% 2 5%	Int Design Temp	Winter Summer	Heating Degree Days	Design Moisture	Daily temp Range					
___ FL, Gainesville	FL_GAINESVILLE_REGIONA	32	92	70	75	1305 5	51	Medium					
BLOCKS													
✓ Number	Name	Area	Volume										
___ 1	Block1	2936	26424 cu ft										
SPACES													
✓ Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Finished	Cooled	Heated				
___ 1	1st Floor	2936	26424	Yes	8	4	Yes	Yes	Yes				
FLOORS (Total Exposed Area = 2936 sq.ft.)													
✓ #	Floor Type	Space	Exposed Perim(ft)	Area	R-Value Perim	U-Factor Joist	Slab Insul Vert/Horiz	Tile	Wood	Carpet			
___ 1	Slab-On-Grade Edge Ins	1st Floor	308 67	2936 sqft	0 0	---	0 304	2 (ft)/0 (ft)	0 00	0 00	1 00		
ROOF													
✓ #	Type	Materials	Roof Area	Gable Area	Framing Fract	Roof Color	Rad Barr	Solar Absor	SA Tested	Emitt	Emitt Tested	Deck Insul	Pitch (deg)
___ 1	Hip	Composition shingles	3399 ft²	0 ft²	0 11	Medium	Y	0 96	No	0 9	No	0	30 26
ATTIC													
✓ #	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC							
___ 1	Full attic	Vented	300	2936 ft²	Y	N							
CEILING (Total Exposed Area = 3230 sq.ft.)													
✓ #	Ceiling Type	Space	R-Value	Ins Type	Area	U-Factor	Framing Frac	Truss Type					
___ 1	Flat ceiling under attic(Vented)	1st Floor	38 0	Double Batt	3229 6ft²	0 024	0 11	Wood					

INPUT SUMMARY CHECKLIST REPORT

WALLS														(Total Exposed Area = 2819 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	S	Exterior	Frame - Wood	1st Floor	13 0	16 0	2	9 0	0	145 5	0 084		0 23	0 75	0 %
___ 2	E	Exterior	Frame - Wood	1st Floor	13 0	2 0	0	9 0	0	18 0	0 084		0 23	0 75	0 %
___ 3	S	Exterior	Frame - Wood	1st Floor	13 0	8 0	0	10 0	0	80 0	0 084		0 23	0 75	0 %
___ 4	W	Exterior	Frame - Wood	1st Floor	13 0	2 0	0	10 0	0	20 0	0 084		0 23	0 75	0 %
___ 5	S	Exterior	Frame - Wood	1st Floor	13 0	13 0	4	10 0	0	133 3	0 084		0 23	0 75	0 %
___ 6	E	Exterior	Frame - Wood	1st Floor	13 0	2 0	0	10 0	0	20 0	0 084		0 23	0 75	0 %
___ 7	S	Exterior	Frame - Wood	1st Floor	13 0	9 0	6	10 0	0	95 0	0 084		0 23	0 75	0 %
___ 8	E	Garage	Frame - Wood	1st Floor	13 0	12 0	0	9 0	0	108 0	0 084		0 23	0 75	0 %
___ 9	S	Garage	Frame - Wood	1st Floor	13 0	25 0	4	9 0	0	228 0	0 084		0 23	0 75	0 %
___ 10	E	Exterior	Frame - Wood	1st Floor	13 0	25 0	10	9 0	0	232 5	0 084		0 23	0 75	0 %
___ 11	N	Exterior	Frame - Wood	1st Floor	13 0	37 0	8	10 0	0	376 7	0 084		0 23	0 75	0 %
___ 12	W	Exterior	Frame - Wood	1st Floor	13 0	8 0	0	10 0	0	80 0	0 084		0 23	0 75	0 %
___ 13	N	Exterior	Frame - Wood	1st Floor	13 0	18 0	6	10 0	0	185 0	0 084		0 23	0 75	0 %
___ 14	E	Exterior	Frame - Wood	1st Floor	13 0	35 0	8	9 0	0	321 0	0 084		0 23	0 75	0 %
___ 15	N	Exterior	Frame - Wood	1st Floor	13 0	16 0	2	9 0	0	145 5	0 084		0 23	0 75	0 %
___ 16	W	Exterior	Frame - Wood	1st Floor	13 0	70 0	0	9 0	0	630 0	0 084		0 23	0 75	0 %

DOORS												(Total Exposed Area = 40 sq.ft.)	
✓ #	Ornt	Adjacent To	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area		
___ 1	S	Exterior	Insulated	1st Floor	None	0 46	3 00	0	6 00	8	20 0ft²		
___ 2	S	Garage	Insulated	1st Floor	None	0 46	3 00	0	6 00	8	20 0ft²		

WINDOWS																	(Total Exposed Area = 369 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	S	1	Vinyl	Low-E Double	Y 0 36	0 25	N	N	15 0	1	3 00	5 00	1 5	1 0	None	None		
___ 2	S	3	TIM	Low-E Double	Y 0 36	0 25	N	N	13 3	2	1 00	6 67	9 5	1 0	None	None		
___ 3	S	3	Vinyl	Low-E Double	Y 0 36	0 25	N	N	8 0	1	5 33	1 50	9 5	1 0	None	None		
___ 4	S	5	Vinyl	Low-E Double	Y 0 36	0 25	N	N	36 0	2	3 00	6 00	7 5	1 0	None	None		
___ 5	S	7	Vinyl	Low-E Double	Y 0 36	0 25	N	N	6 0	1	2 00	3 00	1 5	1 0	None	None		
___ 6	E	10	Vinyl	Low-E Double	Y 0 36	0 25	N	N	3 0	1	3 00	1 00	1 5	1 0	None	None		
___ 7	E	10	Vinyl	Low-E Double	Y 0 36	0 25	N	N	16 0	1	4 00	4 00	1 5	1 0	None	None		
___ 8	N	11	Vinyl	Low-E Double	Y 0 36	0 25	N	N	72 0	4	3 00	6 00	1 5	1 0	None	None		
___ 9	N	11	Vinyl	Low-E Double	Y 0 36	0 25	N	N	6 0	1	2 00	3 00	1 5	1 0	None	None		
___ 10W		12	TIM	Low-E Double	Y 0 36	0 25	N	N	24 0	1	3 00	8 00	10 5	1 0	None	None		
___ 11N		13	Vinyl	Low-E Double	Y 0 36	0 25	N	N	128 0	4	4 00	8 00	10 5	1 0	None	None		
___ 12N		15	Vinyl	Low-E Double	Y 0 36	0 25	N	N	6 0	1	2 00	3 00	1 5	1 0	None	None		
___ 13W		16	Vinyl	Low-E Double	Y 0 36	0 25	N	N	30 0	2	3 00	5 00	1 5	1 0	None	None		
___ 14W		16	Vinyl	Low-E Double	Y 0 36	0 25	N	N	6 0	1	2 00	3 00	1 5	1 0	None	None		

INFILTRATION										
✓ #	Scope	Method	SLA	CFM50	ELA	EqLA	ACH	ACH50	Space(s)	Infiltration Test Volume
___ 1	Wholehouse	Proposed ACH(50)	0 00040	3083	169 13	317 53	0 1438	7 0	All	26424 cu ft

GARAGE								
✓ #	Floor Area	Length	Width	Roof Area	Exposed Perimeter	Area Under Uncond	Avg Wall Height	Exposed Wall Insulation
___ 1	650 ft²	25 3 ft²	25 7 ft²	650 ft²	66 ft	650 ft	9 ft	1

INPUT SUMMARY CHECKLIST REPORT

MASS																			
✓ #	Mass Type	Area	Thickness	Furniture Fraction	Space														
___ 1	Default(8 lbs/sq ft)	0 ft²	0 ft	0 30	1st Floor														
HEATING SYSTEM																			
✓ #	System Type	Subtype/Speed	AHRI #	Efficiency	Capacity kBtu/hr	---Geothermal HeatPump---			Ducts	Block									
___ 1	Electric Heat Pump	None/Single		HSPF2 8 80	45 5	Entry	Power	Volt	Current	sys#1	1								
COOLING SYSTEM																			
✓ #	System Type	Subtype/Speed	AHRI #	Efficiency	Capacity kBtu/hr	Air Flow cfm	SHR	Duct	Block										
___ 1	Central Unit	None/Single		SEER2*16 5	35 5	1080	0 75	sys#1	1										
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	40 gal	120 deg	Standard	Yes	None	12								
DUCTS																			
✓ #	Duct Location	Supply R-Value	Supply Area	Return Location	Return R-Value	Return Area	Leakage Type	AHU Location	CFM 25 TOT OUT	QN OUT	AHU SEALED	RLF	HVAC # Heat Cool						
___ 1	Attic	6 0	734 ft²	Attic	6 0	147 ft²	Default Leakage	Garage	(Default)	(Default)			1 1						
TEMPERATURES																			
Programable Thermostat <input checked="" type="checkbox"/> Y Ceiling Fans <input type="checkbox"/> 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 Type	HERS 2006 Reference																	
		1	2	3	4	5	6	Hours						7	8	9	10	11	12
___	Cooling (WD)	AM PM	78 80	78 80	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	
___	Cooling (WEH)	AM PM	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	78 78	
___	Heating (WD)	AM PM	66 68	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66	68 66	
___	Heating (WEH)	AM PM	66 68	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66	68 66	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 94

The lower the EnergyPerformance Index, the more efficient the home

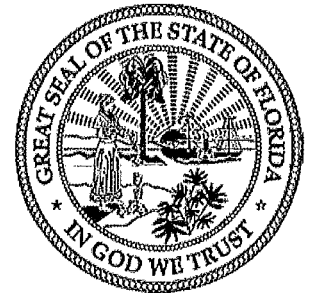
,Lake City,FL,32055

<p>1. New construction or existing New (From Plans)</p> <p>2. Single family or multiple family Detached</p> <p>3. Number of units, if multiple family 1</p> <p>4. Number of Bedrooms 4</p> <p>5. Is this a worst case? No</p> <p>6. Conditioned floor area above grade (ft²) 2936 Conditioned floor area below grade (ft²) 0</p> <p>7. Windows** Description Area</p> <p> a. U-Factor: Dbl, U=0.36 369 33 ft² SHGC: SHGC=0.25</p> <p> b. U-Factor: N/A ft² SHGC:</p> <p> c. U-Factor: N/A ft² SHGC:</p> <p>Area Weighted Average Overhang Depth: 6.251 ft Area Weighted Average SHGC: 0 250</p> <p>8. Skylights Description Area</p> <p> U-Factor:(AVG) N/A N/A ft² SHGC(AVG) N/A</p> <p>9. Floor Types Insulation Area</p> <p> a. Slab-On-Grade Edge Insulation R= 0.0 2936 00 ft² b. N/A R= ft² c. N/A R= ft²</p>	<p>10. Wall Types(2818.5 sqft) Insulation Area</p> <p> a. Frame - Wood, Exterior R=13.0 2482.50 ft² b. Frame - Wood, Adjacent R=13.0 336.00 ft² c. N/A d. N/A</p> <p>11. Ceiling Types(3229.6 sqft.) Insulation Area</p> <p> a. Flat ceiling under att (Vented) R=38.0 3229.60 ft² b. N/A c. N/A</p> <p>12. Roof(Comp. Shingles, Vented) Deck R=0 0 3399 ft²</p> <p>13. Ducts, location & insulation level R ft²</p> <p> a. Sup: Attic, Ret Attic, AH: Garage 6 734 b. c.</p> <p>14. Cooling Systems kBtu/hr Efficiency</p> <p> a. Central Unit 35.5 SEER2.16 50</p> <p>15. Heating Systems kBtu/hr Efficiency</p> <p> a. Electric Heat Pump 45.5 HSPF2 8.80</p> <p>16. Hot Water Systems</p> <p> a. PropaneTankless Cap: 1 gallons EF: 0.590</p> <p> b. Conservation features None</p> <p>17. Credits CV, Pstat</p>
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I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: Lake City,FL,32055



*Note: This is not a Building Energy Rating. If your Index is below 70, your home may qualify for energy efficient mortgage (EEM) incentives if you obtain a Florida Energy Rating. For information about the Florida Building Code, Energy Conservation, contact the Florida Building Commission's support staff.

**Label required by Section R303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.

Envelope Leakage Test Report (Blower Door Test)

Residential Prescriptive, Performance or ERI Method Compliance

2023 Florida Building Code, Energy Conservation, 8th Edition

Jurisdiction:	Permit #:
Job Information	
Builder: Gibraltar Contracting LLC	Community: _____ Lot: 29
Address:	
City: Lake City	State: FL Zip: 32055
Air Leakage Test Results <i>Passing results must meet either the Performance, Prescriptive, or ERI Method</i>	
<input type="radio"/> PRESCRIPTIVE METHOD -The building or dwelling unit shall be tested and verified as having an air leakage rate of not exceeding 7 air changes per hour at a pressure of 0.2 inch w.g. (50 Pascals) in Climate Zones 1 and 2.	
<input checked="" type="radio"/> PERFORMANCE or ERI METHOD -The building or dwelling unit shall be tested and verified as having an air leakage rate of not exceeding the selected ACH(50) value, as shown on Form R405-2023 (Performance) or R406-2023 (ERI), section labeled as Infiltration, sub-section ACH50 ACH(50) specified on Form R405-2023-Energy Calc (Performance) or R406-2023 (ERI): 7.000	
<div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="flex: 1;"> $\frac{\text{CFM}(50)}{\text{Building Volume}} \times 60 \div \frac{26424}{\text{ACH}(50)} = \text{ACH}(50)$ <div style="display: flex; align-items: center; margin-top: 10px;"> <input type="checkbox"/> PASS </div> <div style="margin-top: 10px;"> <input type="checkbox"/> When ACH(50) is less than 3, Mechanical Ventilation installation must be verified by building department. </div> </div> <div style="flex: 1; text-align: right;"> <p><u>Method for calculating building volume:</u></p> <input type="radio"/> Retrieved from architectural plans <input checked="" type="radio"/> Code software calculated <input type="radio"/> Field measured and calculated </div> </div>	
<p>R402.4.1.2 Testing. The building or dwelling unit shall be tested and verified as having an air leakage rate not exceeding seven air changes per hour in Climate Zones 1 and 2, and three air changes per hour in Climate Zones 3 through 8. Dwelling units with an air leakage rate less than three air changes per hour shall be provided with whole-house mechanical ventilation in accordance with Section R403.6.1 of this code and Section M1507.3 if the Florida Building Code, Residential Testing shall be conducted in accordance with ANSI/RESNET/ICC 380 and reported at a pressure of 0.2 inch w.g. (50 Pascals). Testing shall be conducted by either individuals as defined in Section 553.993(5) or (7), Florida Statutes, or individuals licensed as set forth in Section 489.105(3)(f), (g), or (i) or an approved third party. A written report of the results of the test shall be signed by the party conducting the test and provided to the code official. Testing shall be performed at any time after creation of all penetrations of the building thermal envelope.</p> <p>During testing</p> <ol style="list-style-type: none"> 1 Exterior windows and doors, fireplace and stove doors shall be closed, but not sealed, beyond the intended weatherstripping or other infiltration control measures 2 Dampers including exhaust, intake, makeup air, back draft and flue dampers shall be closed, but not sealed beyond intended infiltration control measures 3 Interior doors, if installed at the time of the test, shall be open 4 Exterior doors for continuous ventilation systems and heat recovery ventilators shall be closed and sealed 5 Heating and cooling systems, if installed at the time of the test, shall be turned off 6 Supply and return registers, if installed at the time of the test, shall be fully open 7 If an attic is both sealed and insulated at the roof deck, interior access doors and hatches between the conditioned space volume and the attic shall be opened during the test and the volume of the attic shall be added to the conditioned space volume for purposes of reporting the infiltration volume and calculating the air leakage of the home 	
Testing Company	
Company Name _____ Phone _____ I hereby verify that the above Air Leakage results are in accordance with the 2023 8th Edition Florida Building Code Energy Conservation requirements according to the compliance method selected above.	
Signature of Tester: _____ Date of Test: _____ Printed Name of Tester: _____ License/Certification #: _____ Issuing Authority: _____	