

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: Rose Point Spec Street: City, State, Zip: , FL , Owner: Design Location: FL, Gainesville	Builder Name: Stanley Crawford Construction Permit Office: Permit Number: Jurisdiction: County: columbia (Florida Climate Zone 2)
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1. New construction or existing New (From Plans) 2. Single family or multiple family Single-family 3. Number of units, if multiple family 1 4. Number of Bedrooms 3 5. Is this a worst case? No 6. Conditioned floor area above grade (ft²) 1293 Conditioned floor area below grade (ft²) 0 7. Windows(144.3 sqft.) Description Area a. U-Factor: Dbl, U=0.33 144.33 ft² SHGC: SHGC=0.22 b. U-Factor: N/A ft² SHGC: c. U-Factor: N/A ft² SHGC: d. U-Factor: N/A ft² SHGC: Area Weighted Average Overhang Depth: 3.382 ft. Area Weighted Average SHGC: 0.220 8. Floor Types (1293.0 sqft.) Insulation Area a. Slab-On-Grade Edge Insulation R=0.0 1293.00 ft² b. N/A R= ft² c. N/A R= ft²	9. Wall Types(1556.3 sqft.) Insulation Area a. Frame - Wood, Exterior R=13.0 1358.30 ft² b. Frame - Wood, Adjacent R=13.0 198.00 ft² c. N/A R= ft² d. N/A R= ft² 10. Ceiling Types (1293.0 sqft.) Insulation Area a. Under Attic (Vented) R=30.0 1293.00 ft² b. N/A R= ft² c. N/A R= ft² 11. Ducts R ft² a. Sup: Attic, Ret: Attic, AH: Garage 6 258.6 12. Cooling systems kBtu/hr Efficiency a. Central Unit 30.0 SEER:15.00 13. Heating systems kBtu/hr Efficiency a. Electric Heat Pump 30.0 HSPF:8.50 14. Hot water systems Cap: 40 gallons a. Electric EF: 0.920 b. Conservation features None 15. Credits Pstat
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Glass/Floor Area: 0.112	Total Proposed Modified Loads: 39.43 Total Baseline Loads: 43.68	<h1 style="margin: 0;">PASS</h1>
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I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code. PREPARED BY: _____ DATE: _____ 6-25-20 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: _____
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- 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 requires an Air Barrier and Insulation Inspection Checklist in accordance with R402.4.1.1 and this project requires an envelope leakage test report with envelope leakage no greater than 5.00 ACH50 (R402.4.1.2).
- Compliance with a proposed duct leakage Qn requires a 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.

INPUT SUMMARY CHECKLIST REPORT

PROJECT

Title:	Rose Point Spec	Bedrooms:	3	Address Type:	Street Address
Building Type:	User	Conditioned Area:	1376	Lot #	
Owner Name:		Total Stories:	1	Block/Subdivision:	
# of Units:	1	Worst Case:	No	PlatBook:	
Builder Name:	Stanley Crawford Constructio	Rotate Angle:	0	Street:	
Permit Office:		Cross Ventilation:		County:	columbia
Jurisdiction:		Whole House Fan:		City, State, Zip:	, FL ,
Family Type:	Single-family				
New/Existing:	New (From Plans)				
Comment:					

CLIMATE

✓	Design Location	TMY Site	Design Temp		Int Design Temp		Heating	Design	Daily Temp
			97.5 %	2.5 %	Winter	Summer	Degree Days	Moisture	Range
_____	FL, Gainesville	FL_GAINESVILLE_REGI	32	92	70	75	1305.5	51	Medium

BLOCKS

Number	Name	Area	Volume
1	Block1	1293	11637

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Main	1293	11637	Yes	6	3	1	Yes	Yes	Yes

FLOORS

✓	#	Floor Type	Space	Perimeter	R-Value	Area		Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	Main	173 ft	0	1293 ft²	----	0.33	0.33	0.34

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Rad Barr	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
_____	1	Hip	Composition shingles	1498 ft²	0 ft²	Medium	N	0.85	No	0.9	No	0	30.3

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full attic	Vented	300	1293 ft²	N	N

CEILING

✓	#	Ceiling Type	Space	R-Value	Ins Type	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	Main	30	Blown	1293 ft²	0.11	Wood

INPUT SUMMARY CHECKLIST REPORT

WALLS

✓	#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
___	1	N	Exterior	Frame - Wood	Main	13	31	6	9		283.5 ft²	0.625	0.23	0.75	0
___	2	E	Exterior	Frame - Wood	Main	13	5	6	9		49.5 ft²	0.625	0.23	0.75	0
___	3	N	Exterior	Frame - Wood	Main	13	14	6	9		130.5 ft²	0.625	0.23	0.75	0
___	4	W	Exterior	Frame - Wood	Main	13	5	6	9		49.5 ft²	0.625	0.23	0.75	0
___	5	E	Exterior	Frame - Wood	Main	13	28	8	9		258.0 ft²	0.625	0.23	0.75	0
___	6	S	Exterior	Frame - Wood	Main	13	6	6	9		58.5 ft²	0.625	0.23	0.75	0
___	7	E	Exterior	Frame - Wood	Main	13	5	10	9		52.5 ft²	0.625	0.23	0.75	0
___	8	S	Exterior	Frame - Wood	Main	13	11	8	9		105.0 ft²	0.625	0.23	0.75	0
___	9	W	Exterior	Frame - Wood	Main	13	11		9		99.0 ft²	0.625	0.23	0.75	0
___	10	S	Exterior	Frame - Wood	Main	13	6		9		54.0 ft²	0.625	0.23	0.75	0
___	11	W	Exterior	Frame - Wood	Main	13	24	3	9		218.3 ft²	0.625	0.23	0.75	0
___	12	S	Garage	Frame - Wood	Main	13	22		9		198.0 ft²	0.625	0.23	0.75	0

DOORS

✓	#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
___	1	N	Insulated	Main	None	.4	3		6	8	20 ft²
___	2	S	Insulated	Main	None	.4	3		6	8	20 ft²
___	3	S	Insulated	Main	None	.4	2	8	6	8	17.8 ft²

WINDOWS

Orientation shown is the entered, Proposed orientation.

✓	#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Imp	Area	Overhang Depth	Separation	Int Shade	Screening
___	1	N	1	Vinyl	Low-E Double	Yes	0.33	0.22	N	45.0 ft²	1 ft 6 in	1 ft 4 in	None	None
___	2	N	3	Vinyl	Low-E Double	Yes	0.33	0.22	N	30.0 ft²	7 ft 0 in	1 ft 4 in	None	None
___	3	W	4	Vinyl	Low-E Double	Yes	0.33	0.22	N	20.0 ft²	1 ft 6 in	1 ft 4 in	None	None
___	4	W	4	Vinyl	Low-E Double	Yes	0.33	0.22	N	6.0 ft²	1 ft 6 in	1 ft 4 in	None	None
___	5	S	6	Vinyl	Low-E Double	Yes	0.33	0.22	N	13.3 ft²	9 ft 6 in	1 ft 4 in	None	None
___	6	S	8	Vinyl	Low-E Double	Yes	0.33	0.22	N	30.0 ft²	1 ft 6 in	1 ft 4 in	None	None

GARAGE

✓	#	Floor Area	Ceiling Area	Exposed Wall Perimeter	Avg. Wall Height	Exposed Wall Insulation
___	1	484 ft²	484 ft²	66 ft	9 ft	1

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Proposed ACH(50)	.000286	969.8	53.24	100.12	.1128	5

INPUT SUMMARY CHECKLIST REPORT

HEATING SYSTEM										
✓	#	System Type	Subtype	Speed	Efficiency	Capacity	Block	Ducts		
✓	1	Electric Heat Pump/	None	Singl	HSPF:8.5	30 kBtu/hr	1	sys#1		

COOLING SYSTEM										
✓	#	System Type	Subtype	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
✓	1	Central Unit/	None	Singl	SEER: 15	30 kBtu/hr	900 cfm	0.85	1	sys#1

HOT WATER SYSTEM									
✓	#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
✓	1	Electric	None	Garage	0.92	40 gal	60 gal	120 deg	None

SOLAR HOT WATER SYSTEM							
✓	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
✓	None	None			ft²		

DUCTS														
✓	#	---- Supply ----			---- Return ----		Leakage Type	Air Handler	CFM 25 TOT	CFM25 OUT	QN	RLF	HVAC # Heat Cool	
		Location	R-Value	Area	Location	Area								
✓	1	Attic	6	258.6 ft	Attic	64.65 ft	Prop. Leak Free	Garage	--- cfm	38.8 cfm	0.03	0.50	1	1

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

MASS				
Mass Type	Area	Thickness	Furniture Fraction	Space
Default(8 lbs/sq.ft.)	0 ft²	0 ft	0.3	Main