

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

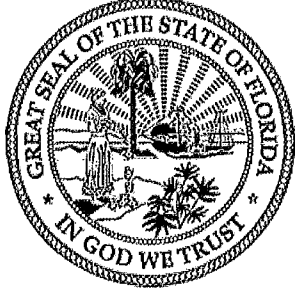
Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: Metzger Residence Street: 329 SW William Young Ln City, State, Zip: Lake City, FL, 32024 Owner: Joseph & Cheryl Metzger Design Location: FL, Gainesville	Builder Name: Permit Office: Columbia County Permit Number: Jurisdiction: Columbia(Florida Climate Zone 2) County:
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1. New construction or existing New (From Plans) 2. Single family or multiple family Detached 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) 3216 Conditioned floor area below grade (ft²) 0 7. Windows(399.0 sqft) Description Area a. U-Factor. Dbl, U=0.36 399.00 ft² SHGC: SHGC=0.25 b. U-Factor: N/A ft² SHGC c. U-Factor: N/A ft² SHGC Area Weighted Average Overhang Depth: 2.742 ft Area Weighted Average SHGC 0.250 8. Skylights Description Area U-Factor:(AVG) N/A N/A ft² SHGC(AVG): N/A 9. Floor Types Insulation Area a. Crawlspace R= 19.0 2257.00 ft² b. Floor over Garage R= 19.0 479.50 ft² c. other (see details) R= 479.50 ft²	10. Wall Types(3592.7 sqft.) Insulation Area a. Frame - Wood, Exterior R=13.0 3379.70 ft² b. Frame - Wood, Adjacent R=13.0 213.00 ft² c. N/A d. N/A 11. Ceiling Types(3010.1 sqft.) Insulation Area a. Flat ceiling under att (Vented) R=38.0 3010.10 ft² b. N/A c. N/A 12. Roof(Comp. Shingles, Vented) Deck R=0.0 3289 ft² 13. Ducts, location & insulation level R ft² a. Sup: Attic, Ret: Attic, AH. 2nd Floor 6 804 b. c. 14. Cooling Systems kBtu/hr Efficiency a. Central Unit 58.5 SEER2:15.50 15. Heating Systems kBtu/hr Efficiency a. Electric Heat Pump 58.5 HSPF2:8.80 16. Hot Water Systems a. Electric Cap. 50 gallons EF. 0.920 b. Conservation features 17. Credits None CV, Pstat
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Glass/Floor Area: 0.124	Total Proposed Modified Loads: 87.20	PASS
	Total Baseline Loads: 94.50	

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

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code. PREPARED BY: <u>Wm C. [Signature]</u> DATE: <u>7/23/2025</u> 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 <div style="text-align: center;">  </div> 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.
- 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	Metzger Residence			Address type	Street Address																			
Building Type	User			Bedrooms	3		Lot #	---																
Owner	Joseph & Cheryl Metzger			Conditioned Area	3216		Block/SubDivision	---																
Builder Home ID				Total Stories	2		PlatBook	---																
Builder Name				Worst Case	No		Street	329 SW William Young Ln																
Permit Office	Columbia County			Rotate Angle	0		County	Columbia																
Jurisdiction				Cross Ventilation	Yes		City, State, Zip	Lake City, FL, 32024																
Family Type	Detached			Whole House Fan	No																			
New/Existing	New (From Plans)			Terrain	Suburban																			
Year Construct	2025			Shielding	Suburban																			
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												
___ FL, Gainesville	FL_GAINESVILLE_REGIONA			32 92		70 75		1305 5		51		Medium												
BLOCKS																								
<input checked="" type="checkbox"/> Number	Name		Area		Volume																			
___ 1	Block1		3216		27985 cu ft																			
SPACES																								
<input checked="" type="checkbox"/> Number	Name		Area		Volume		Kitchen		Occupants		Bedrooms		Finished		Cooled		Heated							
___ 1	1st Floor		2257		20313		Yes		6		2		Yes		Yes		Yes							
___ 2	2nd Floor		959		7672		No		4		1		Yes		Yes		Yes							
FLOORS													(Total Exposed Area = 2737 sq.ft.)											
<input checked="" type="checkbox"/> #	Floor Type		Space		Exposed Perim(ft)		Area		R-Value Perim Joist		U-Factor		Slab Insul Vert/Horiz		Tile		Wood		Carpet					
___ 1	Crawlspace		1st Floor		274		2257 sqft		0 0 19 0		0 047		-----		0 00		0 00		1 00					
___ 2	Floor over Garage		2nd Floor		---		479 5 sqft		--- 19 0		0 046		-----		0 00		0 00		1 00					
___ 3	Floor Over Other Space		2nd Floor		---		479 5 sqft		--- 19 0		0 046		-----		0 00		0 00		1 00					
ROOF																								
<input checked="" type="checkbox"/> #	Type		Materials		Roof Area		Gable Area		Framing Fract		Roof Color		Rad Barr		Solar Absor		SA Tested		Emitt Tested		Deck Insul		Pitch (deg)	
___ 1	Gable or shed		Composition shingles		3289 ft²		510 ft²		0 11		Medium		Y		0 96		No		0 9		No		0 33 69	
ATTIC																								
<input checked="" type="checkbox"/> #	Type		Ventilation		Vent Ratio (1 in)		Area		RBS		IRCC													
___ 1	Partial cathedral ceiling		Vented		300		2737 ft²		Y		N													

INPUT SUMMARY CHECKLIST REPORT

CEILING (Total Exposed Area = 3010 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	1955.3ft²	0.024	0.11	Wood				
2	Flat ceiling under attic(Vented)	2nd Floor	38.0	Blown	1054.9ft²	0.024	0.11	Wood				

WALLS (Total Exposed Area = 3593 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	17.0 4	9.0 0	156.0	0.084		0.23	0.75	0%
2	W	Exterior	Frame - Wood	1st Floor	13.0	5.0 0	9.0 0	45.0	0.084		0.23	0.75	0%
3	S	Exterior	Frame - Wood	1st Floor	13.0	12.0 0	9.0 0	108.0	0.084		0.23	0.75	0%
4	E	Exterior	Frame - Wood	1st Floor	13.0	6.0 0	9.0 0	54.0	0.084		0.23	0.75	0%
5	S	Exterior	Frame - Wood	1st Floor	13.0	16.0 0	13.0 6	216.0	0.084		0.23	0.75	0%
6	W	Exterior	Frame - Wood	1st Floor	13.0	6.0 0	9.0 0	54.0	0.084		0.23	0.75	0%
7	S	Exterior	Frame - Wood	1st Floor	13.0	14.0 0	9.0 0	126.0	0.084		0.23	0.75	0%
8	E	Exterior	Frame - Wood	1st Floor	13.0	5.0 0	9.0 0	45.0	0.084		0.23	0.75	0%
9	S	Exterior	Frame - Wood	1st Floor	13.0	10.0 0	9.0 0	90.0	0.084		0.23	0.75	0%
10	E	Exterior	Frame - Wood	1st Floor	13.0	19.0 2	9.0 0	172.5	0.084		0.23	0.75	0%
11	N	Garage	Frame - Wood	1st Floor	13.0	23.0 8	9.0 0	213.0	0.084		0.23	0.75	0%
12	E	Exterior	Frame - Wood	1st Floor	13.0	21.0 10	9.0 0	196.5	0.084		0.23	0.75	0%
13	N	Exterior	Frame - Wood	1st Floor	13.0	9.0 0	9.0 0	81.0	0.084		0.23	0.75	0%
14	W	Exterior	Frame - Wood	1st Floor	13.0	9.0 0	9.0 0	81.0	0.084		0.23	0.75	0%
15	N	Exterior	Frame - Wood	1st Floor	13.0	22.0 4	9.0 0	201.0	0.084		0.23	0.75	0%
16	E	Exterior	Frame - Wood	1st Floor	13.0	13.0 8	10.0 0	136.7	0.084		0.23	0.75	0%
17	N	Exterior	Frame - Wood	1st Floor	13.0	16.0 0	10.0 0	160.0	0.084		0.23	0.75	0%
18	W	Exterior	Frame - Wood	1st Floor	13.0	14.0 0	10.0 0	140.0	0.084		0.23	0.75	0%
19	W	Exterior	Frame - Wood	1st Floor	13.0	31.0 8	9.0 0	285.0	0.084		0.23	0.75	0%
20	S	Exterior	Frame - Wood	2nd Floor	13.0	19.0 0	8.0 0	152.0	0.084		0.23	0.75	0%
21	E	Exterior	Frame - Wood	2nd Floor	13.0	43.0 0	8.0 0	344.0	0.084		0.23	0.75	0%
22	N	Exterior	Frame - Wood	2nd Floor	13.0	14.0 0	8.0 0	112.0	0.084		0.23	0.75	0%
23	W	Exterior	Frame - Wood	2nd Floor	13.0	17.0 0	8.0 0	136.0	0.084		0.23	0.75	0%
24	N	Exterior	Frame - Wood	2nd Floor	13.0	18.0 0	8.0 0	144.0	0.084		0.23	0.75	0%
25	S	Exterior	Frame - Wood	2nd Floor	13.0	18.0 0	8.0 0	144.0	0.084		0.23	0.75	0%

DOORS (Total Exposed Area = 44 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	8.00 0	24.0ft²	
2	E	Exterior	Insulated	1st Floor	None	0.46	3.00 0	6.00 8	20.0ft²	

WINDOWS (Total Exposed Area = 399 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	18.0	1	3.00	6.00	1.5	1.0	None	None
2	S	3	Vinyl	Low-E Double	Y	0.36	0.25	N	N	36.0	2	3.00	6.00	1.0	3.0	None	None
3	S	5	Vinyl	Low-E Double	Y	0.36	0.25	N	N	36.0	2	3.00	6.00	8.5	1.0	None	None
4	S	7	Vinyl	Low-E Double	Y	0.36	0.25	N	N	36.0	2	3.00	6.00	1.0	3.0	None	None
5	S	9	Vinyl	Low-E Double	Y	0.36	0.25	N	N	6.0	1	3.00	2.00	1.5	1.0	None	None
6	E	10	Vinyl	Low-E Double	Y	0.36	0.25	N	N	9.0	1	3.00	3.00	1.5	1.0	None	None
7	N	13	Vinyl	Low-E Double	Y	0.36	0.25	N	N	6.0	1	2.00	3.00	1.5	1.0	None	None
8	N	15	Vinyl	Low-E Double	Y	0.36	0.25	N	N	16.0	1	4.00	4.00	10.5	1.0	None	None
9	N	15	Vinyl	Low-E Double	Y	0.36	0.25	N	N	9.0	1	3.00	3.00	10.5	1.0	None	None
10	E	16	Metal	Low-E Double	Y	0.36	0.25	N	N	64.0	1	8.00	8.00	2.5	1.0	None	None
11	N	17	TIM	Low-E Double	Y	0.36	0.25	N	N	60.0	3	3.00	6.67	1.5	1.0	None	None

INPUT SUMMARY CHECKLIST REPORT

WINDOWS(Continued)

___ 12W	18	Vinyl	Low-E Double	Y	0 36	0 25	N	N	40 0	2	3 00	6 67	1 5	1 0	None	None
___ 13W	19	Vinyl	Low-E Double	Y	0 36	0 25	N	N	14 0	2	3 50	2 00	1 5	1 0	None	None
___ 14W	19	Vinyl	Low-E Double	Y	0 36	0 25	N	N	18 0	1	3 00	6 00	1 5	1 0	None	None
___ 15S	1	Vinyl	Low-E Double	Y	0 36	0 25	N	N	12 0	1	4 00	3 00	1 5	1 0	None	None
___ 16S	20	Vinyl	Low-E Double	Y	0 36	0 25	N	N	4 0	1	2 00	2 00	1 0	3 0	None	None
___ 17N	22	Vinyl	Low-E Double	Y	0 36	0 25	N	N	15 0	1	3 00	5 00	1 0	2 0	None	None

INFILTRATION

✓ #	Scope	Method	SLA	CFM50	ELA	EqLA	ACH	ACH50	Space(s)	Infiltration Test Volume
___ 1	Wholehouse	Proposed ACH(50)	0 00039	3265	179 12	336 28	0 1872	7 0	All	27985 cu ft

GARAGE

✓ #	Floor Area	Length	Width	Roof Area	Exposed Perimeter	Area Under Uncond	Avg Wall Height	Exposed Wall Insulation
___ 1	564 ft²	23 7 ft²	23 8 ft²	564 ft²	50 ft	85 ft	11 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

HEATING SYSTEM

✓ #	System Type	Subtype/Speed	AHRI #	Efficiency	Capacity kBtu/hr	----Geothermal HeatPump----	Ducts	Block
___ 1	Electric Heat Pump	None/Single		HSPF2 8 80	58 5	0 00 0 00 0 00	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 15 5	58 5	1755	0 70	sys#1	1

HOT WATER SYSTEM

✓ #	System Type	Subtype	Location	EF(UEF)	Cap	Use	SetPnt	Fixt Flow	Trap	Pipe Ins	Pipe length
___ 1	Electric	None	Garage	0 92 (0 92)	50 0 gal	40 gal	120 deg	Standard	Yes	None	12
	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	

INPUT SUMMARY CHECKLIST REPORT

DUCTS														
✓ Duct #	Location	Supply 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	Attic	6 0	804 ft²	Attic	6 0	161 ft²	Default Leakage	2nd Floor	(Default)	(Default)			1	1
TEMPERATURES														
Programable Thermostat Y 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 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 78	78 78	78 78	78 78	78 78	78 78	80 78	80 78	80 78	80 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	
Heating (WD)	AM PM	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66	
Heating (WEH)	AM PM	66 68	66 68	66 68	66 68	66 68	68 68	68 68	68 68	68 68	68 68	68 66	68 66	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD**ESTIMATED ENERGY PERFORMANCE INDEX* = 92**

The lower the EnergyPerformance Index, the more efficient the home.

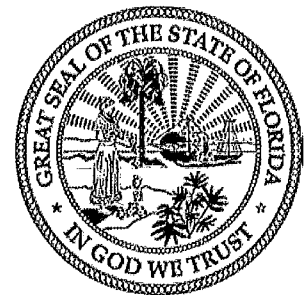
329 SW William Young Ln,Lake City,FL,32024

1. New construction or existing	New (From Plans)	10. Wall Types(3592.7 sqft)	Insulation	Area
2. Single family or multiple family	Detached	a. Frame - Wood, Exterior	R=13.0	3379 70 ft ²
3. Number of units, if multiple family	1	b. Frame - Wood, Adjacent	R=13.0	213.00 ft ²
4. Number of Bedrooms	3	c. N/A		
5. Is this a worst case?	No	d. N/A		
6 Conditioned floor area above grade (ft ²)	3216	11. Ceiling Types(3010.1 sqft.)	Insulation	Area
Conditioned floor area below grade (ft ²)	0	a. Flat ceiling under att (Vented)	R=38.0	3010.10 ft ²
7. Windows**	Description	b. N/A		
a U-Factor:	Dbl, U=0.36	c. N/A		
SHGC:	SHGC=0.25			
b U-Factor:	N/A	12. Roof(Comp. Shingles, Vented) Deck R=0 0		3289 ft ²
SHGC:		13. Ducts, location & insulation level	R	ft ²
c. U-Factor:	N/A	a. Sup: Attic, Ret: Attic, AH: 2nd Floor	6	804
SHGC:		b		
Area Weighted Average Overhang Depth:	2.742 ft	c.		
Area Weighted Average SHGC:	0.250	14. Cooling Systems	kBtu/hr	Efficiency
8. Skylights	Description	a. Central Unit	58.5	SEER2.15.50
U-Factor:(AVG)	N/A			
SHGC(AVG):	N/A	15. Heating Systems	kBtu/hr	Efficiency
9 Floor Types	Insulation	a Electric Heat Pump	58.5	HSPF2:8 80
a. Crawlspace	R= 19.0			
b Floor over Garage	R= 19 0	16. Hot Water Systems		
c. other (see details)	R=	a Electric	Cap 50 gallons	EF: 0 920
	479.50 ft ²			
	479.50 ft ²	b. Conservation features		
		17 Credits		None
				CV, Pstat

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: 329 SW William Young Ln City/FL Zip. Lake City,FL,32024



*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:	Community:	Lot:	NA
Address: 329 SW William Young Ln			
City: Lake City	State: FL	Zip: 32024	
Air Leakage Test Results <i>Passing results must meet either the Performance, Prescriptive, or ERI Method</i>			
<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><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</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"><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 <div style="text-align: right; margin-top: 5px;">ACH(50) specified on Form R405-2023-Energy Calc (Performance) or R406-2023 (ERI): 7 000</div></div>			
<div style="display: flex; justify-content: space-between;"><div style="width: 60%;">$\frac{\text{CFM}(50)}{\text{Building Volume}} \times 60 \div \frac{27985}{\text{ACH}(50)} =$<div style="text-align: center; margin-top: 10px;"> 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="width: 35%;">Method for calculating building volume: <div style="margin-top: 10px;"><input type="radio"/> Retrieved from architectural plans</div><div style="margin-top: 5px;"><input checked="" type="radio"/> Code software calculated</div><div style="margin-top: 5px;"><input type="radio"/> Field measured and calculated</div></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 <i>Florida Building Code, Residential</i> 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), <i>Florida Statutes</i>, 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 measures2 Dampers including exhaust, intake, makeup air, back draft and flue dampers shall be closed, but not sealed beyond intended infiltration control measures3 Interior doors, if installed at the time of the test, shall be open4 Exterior doors for continuous ventilation systems and heat recovery ventilators shall be closed and sealed5 Heating and cooling systems, if installed at the time of the test, shall be turned off6 Supply and return registers, if installed at the time of the test, shall be fully open7 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			
<div style="display: flex; justify-content: space-between;"><div>Company Name _____</div><div>Phone _____</div></div> <p>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</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Signature of Tester: _____</div><div>Date of Test: _____</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Printed Name of Tester: _____</div><div></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>License/Certification #: _____</div><div>Issuing Authority: _____</div></div>			