

## **RESIDENTIAL ENERGY CONSERVATION CODE DOCUMENTATION CHECKLIST**

### **Florida Department of Business and Professional Regulation Simulated Performance Alternative (Performance) Method**

**Applications for compliance with the 2020 Florida Building Code, Energy Conservation via the Residential Simulated Performance Alternative shall include:**

- ☐ *This checklist*
- ☐ *Form R405-2020 report*
- ☐ *Input summary checklist that can be used for field verification (usually four pages/may be greater)*
- ☐ *Energy Performance Level (EPL) Display Card (one page)*
- ☐ *HVAC system sizing and selection based on ACCA Manual S or per exceptions provided in Section R403.7*
- ☐ *Mandatory Requirements (five pages)*

#### **Required prior to CO:**

- ☐ *Air Barrier and Insulation Inspection Component Criteria checklist (Table R402.4.1.1 - one page)*
- ☐ *A completed 2020 Envelope Leakage Test Report (usually one page); exception in R402.4 allows dwelling units of R-2 Occupancies and multiple attached single family dwellings to comply with Section C402.5*
- ☐ *If Form R405 duct leakage type indicates anything other than "default leakage", then a completed 2020 Duct Leakage Test Report - Performance Method (usually one page)*

**FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION**

Florida Department of Business and Professional Regulation - Residential Performance Method

Project Name: America's Home Place (Faller Job)		Builder Name:	
Street:		Permit Office:	
City, State, Zip: , FL,		Permit Number:	
Owner: Michelle Faller		Jurisdiction:	
Design Location: FL, Tallahassee		County: Columbia(Florida Climate Zone 2)	

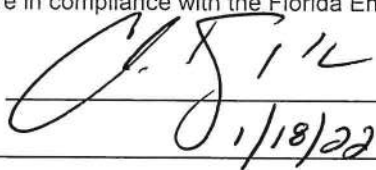

  

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Glass/Floor Area: 0.097	Total Proposed Modified Loads: 58.55	PASS
	Total Baseline Loads: 60.03	

<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></u></p> <p>DATE: <u>1/18/22</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: center;">  </div> <p>BUILDING OFFICIAL: _____</p> <p>DATE: _____</p>
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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 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).

PROJECT																
Title:		America's Home Place (Faller Job)				Address type:		Street Address								
Building Type:		User		Bedrooms:		5		Lot #:		---						
Owner:		Michelle Faller		Conditioned Area:		2576		Block/SubDivision:		---						
				Total Stories:		1		PlatBook:		---						
Builder Name:				Worst Case:		No		Street:								
Permit Office:				Rotate Angle:		0		County:		Columbia						
Jurisdiction:				Cross Ventilation:				City, State, Zip:		FL,						
Family Type:		Detached		Whole House Fan:												
New/Existing:		New (From Plans)		Terrain:		Suburban										
Year Construct:				Shielding:		Suburban										
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, Tallahassee	FL_TALLAHASSEE_REGIONA		28 94		70 75		1545		46		Medium				
BLOCKS																
✓	Number	Name		Area		Volume										
___	1	Block1		2576		23184										
SPACES																
✓	Number	Name		Area		Volume		Kitchen		Occupants		Bedrooms	Finished	Cooled	Heated	
___	1	Main		2576		23184		Yes		5		5	Yes	Yes	Yes	
FLOORS (Total Exposed Area = 2576 sq.ft.)																
✓	#	Floor Type		Space		Exposed Perim		Perimeter R-Value		Area		U-Factor	Joist R-Value	Tile	Wood	Carpet
___	1	Slab-On-Grade Edge Ins		Main		232		0		2576 ft		0.304	---	0.00	0.00	1.00
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		2791 ft²		0 ft²	Medium	Y	0.96	No	0.9	No	0	22.62
ATTIC																
✓	#	Type		Ventilation		Vent Ratio (1 in)		Area		RBS		IRCC				
___	1	Full attic		Vented		300		2576 ft²		Y		N				
CEILING (Total Exposed Area = 2576 sq.ft.)																
✓	#	Ceiling Type		Space		R-Value		Ins. Type		Area		U-Factor	Framing Frac.		Truss Type	
___	1	Under Attic(Vented)		Main		38.0		Blown		2576.0ft²		0.024	0.11		Wood	

# INPUT SUMMARY CHECKLIST REPORT

WALLS														(Total Exposed Area = 2052 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	Main	13.0	39.0	0	9.0	0	351.0	0.084		0.23	0.75	0 %		
___ 2	E	Exterior	Frame - Wood	Main	13.0	75.0	0	9.0	0	675.0	0.084		0.23	0.75	0 %		
___ 3	S	Exterior	Frame - Wood	Main	13.0	39.0	0	9.0	0	351.0	0.084		0.23	0.75	0 %		
___ 4	W	Exterior	Frame - Wood	Main	13.0	75.0	0	9.0	0	675.0	0.084		0.23	0.75	0 %		

DOORS														(Total Exposed Area = 60 sq.ft.)			
✓ #	Ornt	Adjacent To	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area						
___ 1	E	Exterior	Insulated	Main	None	0.46	6.00	0	6.00	8	40.0ft²						
___ 2	W	Exterior	Insulated	Main	None	0.46	3.00	0	6.00	8	20.0ft²						

WINDOWS														(Total Exposed Area = 251 sq.ft.)			
✓ #	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Imp Storm	Area	----Overhang----		Interior Shade	Screening				
										Depth	Separation						
___ 1	N	1	Vinyl	Double (Tinted)	Yes	0.35	0.29	N N	18.0ft²	0.0 ft 0 in	0.0 ft 0 in	Drapes/blinds	None				
___ 2	E	2	Vinyl	Double (Tinted)	Yes	0.35	0.29	N N	101.0ft²	1.0 ft 6 in	0.0 ft 0 in	Drapes/blinds	None				
___ 3	S	3	Vinyl	Double (Tinted)	Yes	0.35	0.29	N N	18.0ft²	0.0 ft 0 in	0.0 ft 0 in	Drapes/blinds	None				
___ 4	W	4	Vinyl	Double (Tinted)	Yes	0.35	0.29	N N	114.0ft²	1.0 ft 6 in	0.0 ft 0 in	Drapes/blinds	None				

INFILTRATION									
✓ #	Scope	Method	SLA	CFM50	ELA	EqLA	ACH	ACH50	Space(s)
___ 1	Wholehouse	Proposed ACH(50)	0.00040	2705	148.39	278.59	0.1400	7.0	All

MASS					
✓ #	Mass Type	Area	Thickness	Furniture Fraction	Space
___ 1	Default(8 lbs/sq.ft.)	0 ft²	0 ft	0.30	Main

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		HSPF: 8.20	48.0		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		SEER:14.0	48.0	1440	0.75	sys#1	1

# INPUT SUMMARY CHECKLIST REPORT

## HOT WATER SYSTEM

#	System Type	Subtype	Location	EF(UEF)	Cap	Use	SetPnt	Fixture Flow	Pipe Ins.	Pipe length
1	Electric	None	Attic	0.96 (0.93)	40.00 gal	80 gal	120 deg	Standard	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 #	Location	Supply R-Value	Area	Return R-Value	Area	Leakage Type	Air Handler	CFM 25 TOT	CFM 25 OUT	QN	RLF	HVAC # Heat	HVAC # Cool
1	Attic	8.0	542 ft²	8.0	135 ft²	Prop. Leak Free	Main	---	---	0.03	0.50	1	1

## 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												
Schedule Type		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	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

