

Project Address: \_\_\_\_\_

Contacts: \_\_\_\_\_

OVERALL REQUIREMENT					YES	NO
All compliance documents completed, signed and registered, if required (HERS verification triggers registration.)					<input type="checkbox"/>	<input type="checkbox"/>
CF1R (Certificate of Compliance - most current, if revised from plan review)					<input type="checkbox"/>	<input type="checkbox"/>
CF2R (Certificates of Installation)					<input type="checkbox"/>	<input type="checkbox"/>
CF3R (Certificates of Verification- HERS)					<input type="checkbox"/>	<input type="checkbox"/>
Define Fuel Type <input type="checkbox"/> natural gas <input type="checkbox"/> propane <input type="checkbox"/> electricity					<input type="checkbox"/>	<input type="checkbox"/>
A copy of the construction documents, or a comparable document confirming compliance, has been provided to the owner.					<input type="checkbox"/>	<input type="checkbox"/>
Does installed measure and/or HERS-verified data match CF1R and meet all mandatory requirements?						
Measure	Required Forms			Notes	YES	NO
	Form Name	CF2R	CF3R			
ADDITIONS & ALTERATIONS WITH NO HERS MEASURES						
Additions: All building features are in one report	ADD-02				<input type="checkbox"/>	<input type="checkbox"/>
Alterations: All building features are in one report	ALT-05				<input type="checkbox"/>	<input type="checkbox"/>
ENVELOPE						
Fenestration	ENV-01				<input type="checkbox"/>	<input type="checkbox"/>
Insulation	ENV-03				<input type="checkbox"/>	<input type="checkbox"/>
Roofing (cool roof, radiant barrier)	ENV-04				<input type="checkbox"/>	<input type="checkbox"/>
HERS Measures (if required) Envelope Air Leakage Quality Insulation Installation (QII)	ENV-20 & MCH-24 ENV-21, 22, 23, 24				<input type="checkbox"/>	<input type="checkbox"/>
HVAC						
Equipment	MCH-01				<input type="checkbox"/>	<input type="checkbox"/>
Whole House Fan (ventilation cooling)	MCH-02, MCH-30				<input type="checkbox"/>	<input type="checkbox"/>
Evaporative Coolers	MCH-04				<input type="checkbox"/>	<input type="checkbox"/>
HERS Measures						
Duct leakage	MCH-20				<input type="checkbox"/>	<input type="checkbox"/>
Duct location	MCH-21				<input type="checkbox"/>	<input type="checkbox"/>
Fan Efficacy	MCH-22				<input type="checkbox"/>	<input type="checkbox"/>
Airflow Rate	MCH-23				<input type="checkbox"/>	<input type="checkbox"/>
Refrigerant Charge	MCH-25				<input type="checkbox"/>	<input type="checkbox"/>
High SEER or EER	MCH-26				<input type="checkbox"/>	<input type="checkbox"/>
IAQ Ventilation	MCH-27				<input type="checkbox"/>	<input type="checkbox"/>
Return Duct and filter Grille	MCH-28				<input type="checkbox"/>	<input type="checkbox"/>
Buried Ducts	MCH-29				<input type="checkbox"/>	<input type="checkbox"/>
PLUMBING						
Distribution						
Non-HERS: Centralized system (multifamily)	PLB-01				<input type="checkbox"/>	<input type="checkbox"/>
Individual system	PLB-02				<input type="checkbox"/>	<input type="checkbox"/>
HERS: Centralized system (multifamily)	PLB-21				<input type="checkbox"/>	<input type="checkbox"/>
Individual system	PLB-22				<input type="checkbox"/>	<input type="checkbox"/>
Pools and Spas	PLB-03				<input type="checkbox"/>	<input type="checkbox"/>
Solar Hot Water	STH-01				<input type="checkbox"/>	<input type="checkbox"/>
ELECTRICAL						
PV Systems	SPV-01				<input type="checkbox"/>	<input type="checkbox"/>
Lighting: Single Family	LTG-01				<input type="checkbox"/>	<input type="checkbox"/>
Multifamily	LTG-02				<input type="checkbox"/>	<input type="checkbox"/>