		ON CERTIFICATE		CF-6R-	MECH-29-HERS			
	Duct C	T =	(Page 1 of 2)					
Site Add	ress:		Enforcement Agency:	Permit Number:				
Enter the	e Duct Sy	stem Name or Identification/Tag:						
		stem Location or Area Served:						
Note: S	ubmit one	Installation Certificate for each duct system	n that must demonstrate	compliance in the	dwelling.			
		CT LOCATION COMPLIANCE (e for supply duct systems entirely in condition		ed surface area in	unconditioned			
CREDI	Γ. A deta	12 LINEAR FEET OF SUPPLY DUCT (iled duct design is not required for complia this measure.						
□Yes	□No	Less than 12 linear feet of supply duct ou		ı	T . =			
		Yes to this com	pliance credit is a pass	✓ □ Pass	✓ □ Fail			
		CTS LOCATED IN CONDITIONED SPA compliance with this measure. HERS verific						
□Yes	□ No	Ducts are located within the conditioned volume		1				
		Yes to this com	pliance credit is a pass	✓ □ Pass	✓ □ Fail			
including agency, e testing fo	details de ntered into r this grou	t be verified by a HERS rater. The size, R-value, scribing if ducts are buried in attic insulation must be the compliance software, and shown on the CF p of compliance credits are described in Referen	ust be shown in the design d -1R for the building. Proce ce Residential Appendix RA	rawings approved b dures for field verifi	y the enforcement			
□ SUPI □Yes	LY DUC No	CT SURFACE AREA REDUCTION COMPrescriptive Cooling Coil Airflow compliance						
□Yes	□ No		proved by the enforcement agency, and the duct system design is detailed					
□Yes	□ No		ely twisted or compressed sections that would restrict required					
□Yes	□No	The installed duct system layout, including duct sizes and locations of supply & return registers match the duct system design plans approved by the enforcement agency, and the installed duct system meets the requirements for Verified Duct Design specified in Reference Residential Appendix RA3.1.4.1.1						
			Yes to all is a	pass ✓ □ Pa	ss ✓ □ Fail			
	ion Numba	r. Registratio		HFRS Pro				

INSTALLATION CERTIFICATE CF-6R-MECH-29-HE												
		ompliance Credit	s - Location; Surface			(Page 2 of 2)						
Site Addı	ess:			Enforceme	nt Agency:	Permit Number:						
□ BURIED DUCTS ON THE CEILING R-VALUE COMPLIANCE CREDIT In order to claim credit for buried ducts on the ceiling, the conditions for the Supply Duct Surface Area Reduction (above) must be met, the approved duct design must identify which portions of the duct system are "Buried", and the installed duct system must conform to the approved duct design. Also, the duct system must meet prescriptive Duct Leakage test requirements and the building must meet Quality Insulation Installation requirements.												
□Yes	□ No	The duct design passes the Supply Duct Surface Area Reduction compliance credit, buried ducts are shown on the approved duct design and on the approved CF-1R, and the installed duct system is consistent with the approved duct design drawings.										
□Yes	□ No	Meets Verified Duct	eets Verified Duct Leakage requirements									
□Yes	□ No	Meets Verified Quality Insulation Installation requirements										
					Yes to all is a pa	nss ✓ □ Pass	✓ 🗆 Fail					
In order to claim credit for buried ducts on the ceiling, the conditions for the Supply Duct Surface Area Reduction (above) must be met, the approved duct design must identify which portions of the duct system are "Deeply Buried", and the installed duct system must conform to the approved duct design. Also, the duct system must meet prescriptive Duct Leakage test requirements and the building must meet Quality Insulation Installation requirements. The duct design passes the Supply Duct Surface Area Reduction compliance credit, buried ducts are shown on the approved duct design and on the approved CF-1R, and the installed duct system is consistent with the approved duct design drawings.												
□Yes	□ No	Meets Verified Duct	Leakage requirements									
□Yes	□ No	Meets Verified Quality Insulation Installation requirements										
					Yes to all is a pas	ss ✓ □ Pass	✓ 🗆 Fail					
 DECLARATION STATEMENT I certify under penalty of perjury, under the laws of the State of California, the information provided on this form is true and correct. I am eligible under Division 3 of the Business and Professions Code to accept responsibility for construction, or an authorized representative of the person responsible for construction (responsible person). I certify that the installed features, materials, components, or manufactured devices identified on this certificate (the installation) conforms to all applicable codes and regulations, and the installation is consistent with the plans and specifications approved by the enforcement agency. I understand that a HERS rater will check the installation to verify compliance, and that that if such checking identifies defects, I am required to take corrective action at my expense. I understand that Energy Commission and HERS provider representatives will also perform quality assurance checking of installations, including those approved as part of a sample group but not checked by a HERS rater, and if those installations fail to meet the requirements of such quality assurance checking, the required corrective action and additional checking/testing of other installations in that HERS sample group will be performed at my expense. I reviewed a copy of the Certificate of Compliance (CF-1R) form approved by the enforcement agency that identifies the specific requirements for the installation. I certify that the requirements detailed on the CF-1R that apply to the installation have been met. I will ensure that a completed, signed copy of this Installation Certificate shall be posted, or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand 												
that a buildi multip	signed cong owner ole orienta	opy of this Installation at occupancy. I will tion alternatives, and b installing Subcontractor	n Certificate is required to ensure that all Installation beginning October 1, 2010, or or General Contractor or	be included Certificates w for all low-ris Builder/Own	with the documenta vill come from a HERS see residential building er)	ation the builder pr S provider data regis	rovides to the					
Responsib	ole Person	s Name:		Responsible	esponsible Person's Signature:							
CSLB License:		Date Signed:	Position Wi	th Company (Title):	ompany (Title):							

_ HERS Provider: _