Project Name and Address	**Authority Having Jurisdiction**
Name: Project Name	Enforcement Agency: Agency
Address: Project Address	Permit Number: Permit Number
City, Zip: City, Zip Code	Permit Acceptance Date: Date

Building: Enter Value	Floor: Enter Value	Room: Enter Value	Control/tag: Value

☐ Construction inspection and functional testing comply ☐ Does not comply	Date Submitted to AHJ: Date

Intent:	Verify that the supply air temperature modulates to meet system temperature setpoint(s). Reference NRCC-MCH-E for nonresidential (including nonresidential spaces in high-rise multifamily) building permits or LMCC-MCH-E for nonresidential spaces in low-rise multifamily building permits. Submit one Certificate of Acceptance for each system that must demonstrate compliance. References: §120.5(a)15, §140.4(f), §160.3(d)1O, §170.2(c)4D, and NA7.5.15.

Table A: Construction Inspection

Prior to functional testing, verify and document all of the following

Step	Entry	Item	Code Reference
1	No Entry	Check the following Required Documentation:	N/A
1.1	☐ Pass ☐ Fail	Designs, plans, schematics, and schedules as approved by the authority having jurisdiction	N/A
1.2	☐ Pass ☐ Fail	NRCC-MCH-E or LMCC-MCH-E as approved by the authority having jurisdiction	§10-103(a)2A
1.3	☐ Pass ☐ Fail	Manufacturer specifications, calibration certificates, or tear sheets for the installed system as available	N/A
2	No Entry	Prior to functional testing, verify and document the following:	NA7.5.15.1
2.1	☐ Pass ☐ Fail	Supply air temperature reset controls are installed as specified by the requirements	NA7.5.15.1(a) §140.4(f) §170.2(c)4D
2.2	☐ Pass ☐ Fail	All system air temperature sensors are factory or field calibrated within 2% of a calibrated reference temperature sensor	NA7.5.15.1(b)
2.3	Enter Value	Document current supply air temperature (°F)	NA7.5.15.1(c)
3	☐ Pass ☐ Fail	Verify that the Construction Inspection complies with **ALL** requirements.	N/A

Table B: Functional Testing

Procedure — Pressurized Duct Leakage Test

Step	Entry	Functional Test	Code Reference
0	☐ Pass ☐ Fail ☐ N/A	Check to make sure that chilled/hot water coils, if used, are not already fully open and calling for maximum cooling/heating. If so, reverse steps 2 and 3 and/or change the set point range as necessary to conduct this test (Pass, Fail, N/A)	NA7.5.15.2(a)
1	No Entry	Identify the control parameter	NA7.5.15.2(b)
1.1, or	☐ Check or ☐ NA	Outside air temperature	N/A
1.2, or	☐ Check or ☐ NA	Zone or return air temperature	N/A
1.3, or	☐ Check or ☐ NA	Zone calling for heating or cooling	N/A
1.4	☐ Check or ☐ NA	Other	N/A
2	No Entry	During occupied mode, adjust the reset control parameter to decrease the supply air temperature (to the lower supply temperature limit). Verify and document the following:	NA7.5.15.2 Step 1
2.1	☐ Pass ☐ Fail	Supply air temperature controls modulate as intended	NA7.5.14.2 Step 1(a)
2.2	☐ Pass ☐ Fail	Actual supply air decreases to meet the new setpoint within ±2°F	NA7.5.15.2 Step 1(b)
2.2.1	Enter Value °F	Supply air temperature set point	N/A
2.2.2	Enter Value °F	Actual Supply air temperature	N/A
2.3	☐ Pass ☐ Fail	Supply air temperature stabilizes within 15 minutes	NA7.5.15.2 Step 1(c)
3	No Entry	During occupied mode, adjust the reset control parameter to increase the supply of air temperature (to the upper supply temperature limit). Verify the following:	NA7.5.15.2 Step 2
3.1	☐ Pass ☐ Fail	Supply air temperature controls modulate as intended	NA7.5.15.2 Step 2(a)
3.2	☐ Pass ☐ Fail	Actual supply air temperature changes to meet the new setpoint within ±2°F	NA7.5.15.2 Step 2(b)

Step	Entry	Functional Test	Code Reference
3.2.1	Enter Value °F	Supply air temperature set point	N/A
3.2.2	Enter Value °F	Actual Supply air temperature	N/A
3.3	☐ Pass ☐ Fail	Supply air temperature stabilizes within 15 minutes	NA7.5.15.2 Step 2(c)
4	No Entry	Restore reset control parameter to automatic control. Verify and document the following:	NA7.5.15.2 Step 3
4.1	☐ Pass ☐ Fail	Supply air temperature controls modulate as intended	NA7.5.15.2 Step 3(a)
4.2	☐ Pass ☐ Fail	Actual supply air temperature changes to meet the new setpoint within ±2°F	NA7.5.15.2 Step 3(b)
4.2.1	Enter Value °F	Supply air temperature set point	N/A
4.2.2	Enter Value °F	Actual supply air temperature	N/A
4.3	☐ Pass ☐ Fail	Supply air temperature stabilizes within 15 minutes	NA7.5.15.2 Step 3(c)
5	☐ Pass ☐ Fail	Verify that the Functional Test complies with **ALL** requirements.	N/A

Declaration Statement	Signatory
Document Author I assert that this Certificate of Acceptance documentation is accurate and complete	Name Company Name Author Signature Date Signed
Acceptance Test Technician I certify the following under penalty of perjury, under the laws of the State of California: The information provided on this Certificate of Acceptance is true and correct. I am the person who performed the acceptance verification reported on this Certificate of Acceptance (Field Technician). The construction or installation identified on this Certificate of Acceptance complies with the applicable acceptance requirements indicated in the plans and specifications approved by the enforcement agency and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7. I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and signed by the responsible builder/installer and has been posted or made available with the building permit(s) issued for the building.	Name Company Name ATT No.: ATT Cert. No. Title Phone Signature Date Signed
Responsible Person I assert the following under penalty of perjury, under the laws of the State of California: I am the Field Technician, or the Field Technician is acting on my behalf as my employee or my agent and I have reviewed the information provided on this Certificate of Acceptance. I am eligible under Division 3 of the Business and Professions Code in the applicable classification to accept responsibility for the system design, construction or installation of features, materials, components, or manufactured devices for the scope of work identified on this Certificate of Acceptance and attest to the declarations in this statement (responsible acceptance person). The information provided on this Certificate of Acceptance substantiates that the construction or installation identified on this Certificate of Acceptance complies with the acceptance requirements indicated in the plans and specifications approved by the enforcement agency and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7. I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and is posted or made available with the building permit(s) issued for the building. I understand that a completed, signed copy of this Certificate of Acceptance 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, and I will take the necessary steps to ensure this requirement is accomplished. I understand that a signed copy of this Certificate of Acceptance is required to be included with the documentation the builder provides to the building owner at occupancy, and I will take the necessary steps to ensure this requirement is accomplished.	Name Company Name Lic. No.: License No. Title Phone Signature Date Signed