



Third Party Residential Energy Code Compliance Inspection Form

Development Services 2406
Leopard, Suite 100
Corpus Christi, Texas 78408
Phone: (361) 826-3240 Fax: (361) 826-4375

Permit Number: _____

Project Address: _____

Owner/Builder: _____

Insulation/Air Barrier

Test/Inspection Date: _____

I certify that the insulation installed meets the requirements of Table 402.1 of the 2015 IECC. In addition, I certify the insulation meets the submitted Energy Compliance Report submitted at the time of application for the permit. I have identified the option used for compliance verification as follows {check one of the boxes below}:

- I certify that the blower door test results meet Section 402.4.2.1 of the 2015 IECC. I have attached the test results.
- I certify that the visual inspection results meet Section 402.4.2.2 and Table 402.4.2 of the 2015 IECC
- Insulation Inspection **Approved** by City of Corpus Christi, Development Services Inspector

Duct & HVAC Air Leakage Test

Test/Inspection Date: _____

I certify that the rough-in construction duct test results for air leakage meet the requirement of the 2015 IECC, Chapter 4, Section 403.2.2.2: Check all systems in dwelling- Leakage @ 25pa

- | | | | |
|-------------------------------------|-------------|-------------------------------------|-------------|
| <input type="checkbox"/> System # 1 | CFM Leakage | <input type="checkbox"/> System # 3 | CFM Leakage |
| <input type="checkbox"/> System # 2 | CFM Leakage | <input type="checkbox"/> System # 4 | CFM Leakage |

Additional systems can be attached if needed

Registered Energy Code Compliance Company Information

Company Name:	Certification Number or Accredited Rating Provider:
Company Address:	Company Phone Number

At the time of this test and/or inspection, all items noted above were tested and/or inspected in accordance with the requirements of the 2015 International Energy Conservation Code, Chapter 4, as adopted by the City of Corpus Christi, and were found to be in conformance.

Registered Inspector (Print Name)

Signature of Registered Inspector

Date