Project Name: 2019 Prototype 7320ft2 Prop Elec

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GENER	AL INFORMATION									
01	Project Name	2019 Prototype 7320ft2 Prop Elec	019 Prototype 7320ft2 Prop Elec							
02	Run Title	TDSv30 V19R12 V19 R12 UGLASS15 ELEC PVS	TD							
03	Project Location	1516 Ninth St								
04	City	CTZ16S22A	05	Standards Version	2022					
06	Zip code	95814	07	Software Version	CBECC-Res 2022.0.2 RV					
08	Climate Zone	16	6 O9 Front Orientation (deg/ Cardinal) 0							
10	Building Type	Multifamily	Tultifamily 11 Number of Dwelling Units 8							
12	Project Scope	NewConstruction	13	Number of Bedrooms	12					
14	Addition Cond. Floor Area (ft ²)	0	15	Number of Stories	2					
16	Existing Cond. Floor Area (ft ²)	n/a	17	Fenestration Average U-factor	0.3					
18	Total Cond. Floor Area (ft ²)	7320	19	Glazing Percentage (%)	11.21%					
20	ADU Bedroom Count	n/a	/a ADU Conditioned Floor Area n/a							
22	Is Natural Gas Available?	Yes								

COMPLIANCE RES	SULTS
01	Building Does Not Comply
02	This building incorporates features that require field testing and/or verification by a certified HERS rater under the supervision of a CEC-approved HERS provider.
03	This building incorporates one or more Special Features shown below

Registration Number: Registration Date/Time: HERS Provider:

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ENERGY DESIGN RATING										
	Energy Des	ign Ratings	Complianc	ce Margins						
	Efficiency¹ (EDR)	Total² (EDR)	Efficiency¹ (EDR)	Total² (EDR)						
Standard Design	56.7	34.8								
Proposed Design	64.1	41.8	-7.4	-7						

RESULT: 3: DOES NOT COMPLY

- 1: Efficiency EDR includes improvements to the building envelope and more efficient equipment
- 2: Total EDR includes efficiency and demand response measures such as photovoltaic (PV) systems and batteries
- 3: Building complies when efficiency and total compliance margins are greater than or equal to zero
- Standard Design PV Capacity: 14.26 kWdc
- PV System resized to 14.26 kWdc (a factor of 14.258) to achieve 'Standard Design PV' PV scaling

	ENERGY USE SUMMARY											
Energy Use (kTDV/ft ² -yr)	Standard Design	Proposed Design	Compliance Margin	Percent Improvement								
Space Heating	42.93	51.27	-8.34	-19.4								
Space Cooling	3.94	1.59	2.35	59.6								
IAQ Ventilation	7.25	7.25	0	0								
Water Heating	12.38	27.14	-14.76	-119.2								
Self Utilization Credit	n/a	0	0	n/a								
Compliance Energy Total	66.5	87.25	-20.75	-31.2								

REQUIRED PV SYST	QUIRED PV SYSTEMS - SIMPLIFIED												
01	02	03	04	05	06	07	08	09	10	11	12		
DC System Size (kWdc)	Exception	Module Type	Array Type	Power Electronics	CFI	Azimuth (deg)	Tilt Input	Array Angle (deg)	Tilt: (x in 12)	Inverter Eff. (%)	Annual Solar Access (%)		
14.26	NA	Standard	Fixed (roof mount)	none	true	150-270	n/a	n/a	<=7:12	96	100		

Registration Date/Time: **HERS Provider:** Registration Number:

CERTIFICATE OF COMPLIANCE CF1R-PRF-01E

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REQUIRED SPECIAL FEATURES

The following are features that must be installed as condition for meeting the modeled energy performance for this computer analysis.

- PV System: 14.26 kWdc
- Indoor air quality, balanced fan
- Cool roof
- Insulation below roof deck
- Non-standard duct location (any location other than attic)
- Multifamily: Recirculating demand control
- Northwest Energy Efficiency Alliance (NEEA) rated heat pump water heater; specific brand/model, or equivalent, must be installed

HERS FEATURE SUMMARY

The following is a summary of the features that must be field-verified by a certified HERS Rater as a condition for meeting the modeled energy performance for this computer analysis. Additional detail is provided in the building tables below. Registered CF2Rs and CF3Rs are required to be completed in the HERS Registry

Building-level Verifications:

- Quality insulation installation (QII)
- Indoor air quality ventilation
- Kitchen range hood

Cooling System Verifications:

- Minimum Airflow
- Verified Refrigerant Charge
- Fan Efficacy Watts/CFM

Heating System Verifications:

-- None --

HVAC Distribution System Verifications:

- Duct leakage testing
- Ducts located entirely in conditioned space confirmed by duct leakage testing

Domestic Hot Water System Verifications:

-- None --

BUILDING - FEATURES INFORMA	ILDING - FEATURES INFORMATION											
01	02	03	04	05	06	07						
Project Name	Conditioned Floor Area (ft ²)	Number of Dwelling Units	Number of Bedrooms	Number of Zones	Number of Ventilation Cooling Systems	Number of Water Heating Systems						
2019 Prototype 7320ft2 Prop Elec	7320	8	12	2	0	8						

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ZONE INFORMATION											
01	02	03	04	05							
Zone Name	Zone Type	Zone Floor Area (ft ²)	Avg. Ceiling Height	Number of Dweilling Units							
Zone1	Conditioned	3660	8	4							
Zone2	Conditioned	3660	8	4							

DWELLING UNIT INFORMATION	WELLING UNIT INFORMATION								
01	02	03							
Dwelling Unit Name	Dwelling Unit Type	Zone							
OneBedroomDownstairsZone1-(1/2)	OneBedroom	Zone1							
OneBedroomDownstairsZone1-(2/2)	OneBedroom	Zone1							
TwoBedroomDownstairsZone1-(1/2)	TwoBedroom	Zone1							
TwoBedroomDownstairsZone1-(2/2)	TwoBedroom	Zone1							
OneBedroomUpstairsZone1-(1/2)	OneBedroom	Zone2							
OneBedroomUpstairsZone1-(2/2)	OneBedroom	Zone2							
TwoBedroomUpstairsZone1-(1/2)	TwoBedroom	Zone2							
TwoBedroomUpstairsZone1-(2/2)	TwoBedroom	Zone2							

DWELLING UNIT TYP	PES			0.0		
01	02	03	04	05	06	07
Name	CFA (ft2)	Number of Bedrooms	Number in Building	Space Conditioning Systems Assigned	DHW System Name	IAQ Vent Fan Name
OneBedroom	750	1	4	OneBedroomUpstairsZone1 1/2 CoolingComponent:HeatingComponent:AirDistributionSyste	DHWHeatpump	Specify Individual IAQ Fans

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DWELLING UNIT TYP	PES					
01	02	03	04	05	06	07
Name	CFA (ft2)	Number of Bedrooms	Number in Building	Space Conditioning Systems Assigned	DHW System Name	IAQ Vent Fan Name
TwoBedroom	1080	2	4	TwoBedroomUpstairsZone1 1/2 CoolingComponent:HeatingComponent:AirDistributionSyste	DHWHeatpump	Specify Individual IAQ Fans

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OPAQUE SURFACES				O			
01	02	03	04	05	06	07	08
Name	Zone	Construction	Azimuth	Orientation	Gross Area (ft ²)	Window and Door Area (ft2)	Tilt (deg)
Zone1WallFront	Zone1	Exterior Wall Cons	0	Front	1037	244.7	90
Zone1WallLeft	Zone1	Exterior Wall Cons	90	Left	255	40.5	90
Zone1WallBack	Zone1	Exterior Wall Cons	180	Back	1037	164.7	90
Zone1WallRight	Zone1	Exterior Wall Cons	270	Right	255	40.5	90
Zone2WallFront	Zone2	Exterior Wall Cons	0	Front	1037	244.7	90
Zone2WallLeft	Zone2	Exterior Wall Cons	90	Left	255	40.5	90
Zone2WallBack	Zone2	Exterior Wall Cons	180	Back	1037	164.7	90
Zone2WallRight	Zone2	Exterior Wall Cons	270	Right	255	40.5	90
Zone2ToAtticCeiling	Zone2	Ceiling Below Attic Cons	n/a	n/a	3660	n/a	n/a
Zone2ToZone1InteriorF loor	Zone2	Interior Floor	n/a	n/a	3660	n/a	n/a

ATTIC		6					
01	02	03	04	05	06	07	08
Name	Construction	Туре	Roof Rise (x in 12)	Roof Reflectance	Roof Emittance	Radiant Barrier	Cool Roof
Attic	Attic Roof Cons	Ventilated	5	0.2	0.85	No	Yes

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FENESTRATION / GLAZING													
01	02	03	04	05	06	07	08	09	10	11	12	13	14
Name	Туре	Surface	Orientation	Azimuth	Width (ft)	Height (ft)	Mult.	Area (ft²)	U-factor	U-factor Source	SHGC	SHGC Sourc e	Exterior Shading
Zone1WinFront	Window	Zone1WallFront	Front	0	3	5	10	164.7	0.3	NFRC	0.23	NFRC	Bug Screen
Zone1WinLeft	Window	Zone1WallLeft	Left	90	3	5	2	40.5	0.3	NFRC	0.23	NFRC	Bug Screen
Zone1WinBack	Window	Zone1WallBack	Back	180	3	5	10	164.7	0.3	NFRC	0.23	NFRC	Bug Screen
Zone1WinRight	Window	Zone1WallRight	Right	270	3	5	2	40.5	0.3	NFRC	0.23	NFRC	Bug Screen
Zone2WinFront	Window	Zone2WallFront	Front	0	3	5	10	164.7	0.3	NFRC	0.23	NFRC	Bug Screen
Zone2WinLeft	Window	Zone2WallLeft	Left	90	3	5	2	40.5	0.3	NFRC	0.23	NFRC	Bug Screen
Zone2WinBack	Window	Zone2WallBack	Back	180	3	5	10	164.7	0.3	NFRC	0.23	NFRC	Bug Screen
Zone2WinRight	Window	Zone2WallRight	Right	270	3	5	2	40.5	0.3	NFRC	0.23	NFRC	Bug Screen

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OPAQUE DOORS	- 3		
01	02	03	04
Name	Side of Building	Area (ft ²)	U-factor
Zone1DoorFront	Zone1WallFront	80	0.2
Zone2DoorFront	Zone2WallFront	80	0.2
	40		

SLAB FLOORS						
01	02	03	04	05	06	07
Name	Zone	Area (ft2)	Perimeter (ft)	Edge Insul. R-value and Depth	Carpeted Fraction	Heated
Zone1Slab	Zone1	3660	304	None	80%	No

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OPAQUE SURFACE CONSTR	RUCTIONS						
01	02	03	04	05	06	07	08
Construction Name	Surface Type	Construction Type	Framing	Total Cavity R-value	Interior / Exterior Continuous R-value	U-factor	Assembly Layers
Exterior Wall Cons	Exterior Walls	Wood Framed Wall	2x6 @ 16 in. O. C.	R-21	None / R-4	0.051	Inside Finish: Gypsum Board Cavity / Frame: R-21 / 2x6 Sheathing / Insulation: R-4 Sheathing Exterior Finish: Synthetic Stucco
Attic Roof Cons	Attic Roofs	Wood Framed Ceiling	2x4 @ 24 in. O. C.	R-19	None / None	0.055	Roofing: 10 PSF (RoofTile) Tile Gap: present Roof Deck: Wood Siding/sheathing/decking Cavity / Frame: R-13.0 / 2x4 Around Roof Joists: R-6.0 insul.
Ceiling Below Attic Cons	Ceilings (below attic)	Wood Framed Ceiling	2x4 Bottom Chord of Truss @ 24 in. O. C.	R-38	None / None	0.025	Over Ceiling Joists: R-28.9 insul. Cavity / Frame: R-9.1 / 2x4 Btm Chrd Inside Finish: Gypsum Board
Interior Floor	Interior Floors	Wood Framed Floor	2x12 @ 16 in. O. C.	R-0	None / None	0.196	Floor Surface: Carpeted Floor Deck: Wood Siding/sheathing/decking Cavity / Frame: no insul. / 2x12 Ceiling Below Finish: Gypsum Board

BUILDING ENVELOPE - HERS VERIFICATION	~ 0		
01	02	03	04
Quality Insulation Installation (QII)	Quality Installation of Spray Foam Insulation	Building Envelope Air Leakage	CFM50
Required	Not Required	Not Required	n/a

WATER HEATING SYS	I EIVIS	\$						
01	02	03	04	05	06	07	08	09

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Name	System Type	Number of Systems in Building	Multi-Family Distribution Type	Dwelling Unit Distribution Type	Water Heater Name (#)	Solar Heating System	Compact Distribution	HERS Verification
DHWHeatpump	Domestic Hot Water (DHW)	1	Multi-family: Recirculating demand control	Standard Distribution System	DHWHeatpump-heater (1)	n/a	None	n/a

WATER HEATERS											
01	02	03	04	05	06	07	08	09	10	11	12
Name	Heating Element Type	Tank Type	# Units	Tank Vol. (gal)	Energy Factor or Efficiency	Input Rating or Pilot	Tank Insulation R-value (Int/Ext)	Standby Loss or Recovery Eff.	1st Hr. Rating or Flow Rate	NEEA Heat Pump Brand or Model	Tank Location or Ambient Condition
Heatpump	Heat Pump	n/a	16	83	NEEA	n/a	n/a	n/a	n/a	Sanden\SandenGU S_SAN83SSAQA	Outside

WATER HEATERS - CHPWH						
01	02	03	04	05	06	07
Name	HPWH Compressor Type	Number of Compressors	Loop Tank Volume (gal)	Loop Tank Heater Type	Primary Tank Volume (gal)	Recirc Pump Power (Watts)
DHWHeatpump	Sanden	2	80	Commercial Elec Resistance	67.5	10

WATER HEATING - HERS	VERIFICATION						
01	02	03	04	05	06	07	08
Name	Pipe Insulation	Parallel Piping	Compact Distribution	Compact Distribution Type	Recirculation Control	Central DHW Distribution	Shower Drain Water Heat Recovery
OneBedroomDownstai rsZone1 1/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
OneBedroomDownstai rsZone1 2/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required

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WATER HEATING - HERS	VERIFICATION						
01	02	03	04	05	06	07	08
Name	Pipe Insulation	Parallel Piping	Compact Distribution	Compact Distribution Type	Recirculation Control	Central DHW Distribution	Shower Drain Water Heat Recovery
TwoBedroomDownstai rsZone1 1/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
TwoBedroomDownstai rsZone1 2/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
OneBedroomUpstairsZ one1 1/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
OneBedroomUpstairsZ one1 2/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
TwoBedroomUpstairsZ one1 1/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required
TwoBedroomUpstairsZ one1 2/2 DHWHeatpump	Not Required	Not Required	Not Required	None	Not Required	Not Required	Not Required

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SPACE CONDITIONING SYSTEM	15	4.0								
01	02	03	04	05	06	07	08	09	10	11
Name	System Type	Heating Unit Name	Cooling Unit Name	Fan Name	Distribution Name	Required Thermostat Type	Status	Verified Existing Condition	Heating Equipment Count	Cooling Equipment Count
OneBedroomDownstairsZon e1 1/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1

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SPACE CONDITIONING SYSTEM	15									
01	02	03	04	05	06	07	08	09	10	11
Name	System Type	Heating Unit Name	Cooling Unit Name	Fan Name	Distribution Name	Required Thermostat Type	Status	Verified Existing Condition	Heating Equipment Count	Cooling Equipment Count
OneBedroomDownstairsZon e1 2/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1
TwoBedroomDownstairsZon e1 1/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1
TwoBedroomDownstairsZon e1 2/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1
OneBedroomUpstairsZone1 1/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1
OneBedroomUpstairsZone1 2/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1
TwoBedroomUpstairsZone1 1/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1

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SPACE CONDITIONING SYSTEMS										
01	02	03	04	05	06	07	08	09	10	11
Name	System Type	Heating Unit Name	Cooling Unit Name	Fan Name	Distribution Name	Required Thermostat Type	Status	Verified Existing Condition	Heating Equipment Count	Cooling Equipment Count
TwoBedroomUpstairsZone1 2/2 CoolingComponent:Heating Component:AirDistributionS ystem:HVACFan-Furnace:1:3	Heating and cooling system other	HeatingCom ponent	CoolingCom ponent	HVACFan- Furnace	AirDistributi onSystem	Setback	New	NA	1	1

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HVAC - HEATING UNIT TYPES		Ö	
01	02	03	04
Name	System Type	Number of Units	Heating Efficiency
HeatingComponent	Central gas furnace	8	AFUE-80

HVAC - COOLING UNIT	ГҮРЕЅ						
01	02	03	04	05	06	07	08
Name	System Type	Number of Units	Efficiency EER	Efficiency SEER	Zonally Controlled	Mulit-speed Compressor	HERS Verification
CoolingComponent	Central split AC	8	11.7	14	Not Zonal	Single Speed	CoolingComponent- hers-cool

HVAC COOLING - HERS VERIFICA	ATION	<u> </u>			
01	02	03	04	05	06
Name	Verified Airflow	Airflow Target	Verified EER	Verified SEER	Verified Refrigerant Charge
CoolingComponent-hers-cool	Required	350	Not Required	Not Required	Required

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HVAC - DISTRIBUTION	ON SYSTEMS										
01	02	03	04	05	06	07	08	09	10	11	12
			Duct Ins	. R-value	Duct Lo	cation	Surfac	e Area			•
Name	Туре	Design Type	Supply	Return	Supply	Return	Supply	Return	Bypass Duct	Duct Leakage	HERS Verification
AirDistributionSy stem	Conditioned space-entirely	Non-Verified	R-4.2	R-4.2	Conditio ned Zone	Conditio ned Zone	n/a	n/a	No Bypass Duct	Sealed and Tested	AirDistributio nSystem- hers-dist

HVAC DISTRIBUTION	HVAC DISTRIBUTION - HERS VERIFICATION							
01	02	03	04	05	06	07	08	09
Name	Duct Leakage Verification	Duct Leakage Target (%)	Verified Duct Location	Verified Duct Design	Buried Ducts	Deeply Buried Ducts	Low-leakage Air Handler	Low Leakage Ducts Entirely in Conditioned Space
AirDistributionSyst em-hers-dist	Yes	total leakage <= 12.0 or leakage to outdoors <= 6.0	Required	Not Required	Not Required	Credit not taken	Not Required	No

HVAC - FAN SYSTEMS			
01	02	03	04
Name	Туре	Fan Power (Watts/CFM)	Name
HVACFan-Furnace	HVAC Fan	0.45	HVACFan-Furnace-hers-fan

HVAC FAN SYSTEMS - HERS VERIFICATION		
01	02	03
Name	Verified Fan Watt Draw	Required Fan Efficacy (Watts/CFM)
HVACFan-Furnace-hers-fan	Required	0.45

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IAQ (INDOOR AIR QUALITY) FAN	IAQ (INDOOR AIR QUALITY) FANS						
01	02	03	04	05	06		
Dwelling Unit	IAQ CFM	IAQ Watts/CFM	IAQ Fan Type	IAQ Recovery Effectiveness (%)	IAQ Recovery Effectiveness - SREIAQ Recovery Effectiveness - SRE		
OneBedroomDownstairsZone1 1/2 fan 1/1 cnt 1/1	38	0.6	Balanced		n/a		
OneBedroomDownstairsZone1 2/2 fan 1/1 cnt 1/1	38	0.6	Balanced		n/a		
TwoBedroomDownstairsZone1 1/2 fan 1/1 cnt 1/1	55	0.6	Balanced		n/a		
TwoBedroomDownstairsZone1 2/2 fan 1/1 cnt 1/1	55	0.6	Balanced		n/a		
OneBedroomUpstairsZone1 1/2 fan 1/1 cnt 1/1	38	0.6	Balanced		n/a		
OneBedroomUpstairsZone1 2/2 fan 1/1 cnt 1/1	38	0.6	Balanced		n/a		
TwoBedroomUpstairsZone1 1/2 fan 1/1 cnt 1/1	55	0.6	Balanced		n/a		
TwoBedroomUpstairsZone1 2/2 fan 1/1 cnt 1/1	55	0.6	Balanced		n/a		

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CERTIFICATE OF COMPLIANCE

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DOCUM	IENTATION AUTHOR'S DECLARATION STATEMENT	
1. I certi	fy that this Certificate of Compliance documentation is accurate and complete.	
Documer	ntation Author Name:	Documentation Author Signature:
Company		Signature Date:
Address:		CEA/ HERS Certification Identification (If applicable):
City/State	e/Zip:	Phone:
RESPON	SIBLE PERSON'S DECLARATION STATEMENT	
I certify t	he following under penalty of perjury, under the laws of the State of California:	
1.	I am eligible under Division 3 of the Business and Professions Code to accept responsibility for the	building design identified on this Certificate of Compliance.
2.	I certify that the energy features and performance specifications identified on this Certificate of Co	ompliance conform to the requirements of Title 24, Part 1 and Part 6 of the California Code of Regulations.
3.	The building design features or system design features identified on this Certificate of Compliance calculations, plans and specifications submitted to the enforcement agency for approval with this l	are consistent with the information provided on other applicable compliance documents, worksheets, building permit application.
Responsi	ble Designer Name:	Responsible Designer Signature:
Company		Date Signed:
Address:		License:
City/State	e/Zip:	Phone:

Registration Number: Registration Date/Time: HERS Provider:

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Schema Version: rev 20200101

Report Generated: 2020-03-10 20:17:59

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