



Commissioning Acceptance Form

The information requested in this form is required to be submitted to the inspector at the time of the mechanical rough-in inspection.

To complete this form electronically: Open with Internet Explorer, then [Click Here to Save](#) and continue.

Section 1: Project Description

Project Name: _____

Project Address: _____

Mechanical/Building Permit Number: _____

Section 2: Commissioning Authority Statement

I, _____ (Engineer of Record) certify that a Commissioning Authority meeting the qualification requirements of the City of Austin Energy Code (local ordinance 20130606-091, section C403.2.9) has been contracted to perform the mechanical systems commissioning scope of work for this project, and that all commissioning activities are current and on-going as of this date.

Signature

Date

Commissioning Authority Contact Information

Name: _____

Certification: _____

Company: _____

Address: _____

Phone Number: _____