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| **A. General Information** | | |
| 01 | Building Name |  |

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| **B. Design HERS Verified Water Heater System Information**  This table reports the water heating system(s specified on the registered CF1R compliance document for this project. | | | | |
| 01 | 02 | 03 | 04 | 05 |
| Water Heating System ID  or Name | Modeled Equipment  Make and Model | Number of Water Heaters | Tank Location | Exterior Tank Insulation R-value |
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| **C. Installed HERS Verified Water Heater System Information**  This table reports the water heating system(s) specified on the registered CF1R compliance document for this project. | | | | |
| 01 | 02 | 03 | 04 | 05 |
| Water Heating System ID  or Name | Modeled Equipment  Make and Model | Number of Water Heaters | Tank Location | Exterior Tank Insulation R-value |
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| **D. Design HERS Verified Water Heating Distribution Systems Information**  This table reports the water heating distribution types specified on the registered CF1R compliance document for this project. | | |
| 01 | 02 | 03 |
| Water Heating System ID or Name | Central DHW System  Distribution Type | Dwelling Unit DHW System  Distribution Type |
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| **E. Installed HERS Verified Water Heating Distribution Systems Information**  This table reports the water heating distribution types specified on the registered CF1R compliance document for this project. | | |
| 01 | 02 | 03 |
| Water Heating System ID or Name | Central DHW System Distribution Type | Dwelling Unit DHW System  Distribution Type |
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| **F. Mandatory Requirements for All Central Domestic Hot Water Systems** | | |
| 01 | On systems that have a total capacity greater than 167,000 Btu/hr, outlets that require higher than service water temperatures as listed in the ASHRAE Handbook have separate remote heaters, heat exchangers, or boosters to supply the outlet with the higher temperature. (Section 110.3 (c)1) | |
| 02 | Systems with circulating pumps or with electrical heat trace systems shall be capable of automatically turning off the system. (Section 110.3(c)2). | |
| 03 | Unfired storage tanks are insulated with:   * External insulation of R-12, or * Internal insulation of R-16, or   The heat loss of the tank surface based on an 80°F water-air temperature difference shall be less than 6.5 Btuh/ft2. (Section 110.3(c)3). | |
| 04 | Recirculation loop shall meet the following requirements:   * + The recirculation pump is mounted on a vertical section of the return line, OR an automatic air release valve is installed on a riser at least 12 inches in length, on the inlet side of the recirculation pump, no more than 4 feet from the pump. (Section 110.3(c)4A).   + A check valve is located between the recirculation pump and the water heater. (Section 110.3(c)4B).   + A hose bibb is installed between the pump and the water heating equipment with an isolation valve between the hose bibb and the water heating equipment. 110.3(c)4C).   + Isolation valves shall be installed on both sides of the pump, of which the item C valve can be one. 110.3(c)4D   + The cold water piping and the recirculation loop piping shall not be connected to the hot water storage tank drain port. 110.3(c)4E   + A check valve shall be installed on the cold water supply line between the hot water system and the next closest tee on the cold water supply line. 110.3(c)4F. | |
| 05 | Instantaneous water heaters with an input greater than 6.8 kBTU/hr (2kW) shall have isolation valves on both the cold water supply and the hot water line. (110.3 (c)6). | |
| 06 | All sections of the recirculation loop, and the first 5 feet of all branches off the loop are insulated, to the thicknesses required by Table 120.3A. Other hot water piping shall meet the requirements of 150(j) and the installation requirements in, except for the following: (RA4.4.1). The following shall be insulated with a minimum of 1 inch of insulation.   * Piping ¾ inch or greater. * Piping from the water heater to the kitchen sink and dish-washer installed in. * All underground piping * Piping from the heating source to storage tank or between tanks. * Piping installed in the attic that are surrounded by at least 1 (10 cm) inch of insulation and covered with 4 inches of insulation need not be insulated * Piping in walls interior or exterior walls that is surrounded on all sides by at least 1 inch of insulation need not be insulated. * Piping installed in attics with a minimum of 4 inches (10 cm) of attic insulation on top * Piping that penetrates framing members shall not be required to have pipe insulation for the distance of the framing penetration. Metal piping that penetrates metal framing shall use grommets, plugs, wrapping or other insulating material to assure that no contact is made with the metal framing. Insulation shall butt securely against all framing members. * Insulation is not required on the cold water line when it is used as the return | |
| 07 | Verification Status: | * Pass - all applicable requirements are met; or * Fail - one or more applicable requirements are not met. Enter reason for failure in corrections notes field below; or * All N/A - This entire table is not applicable |
| 08 | Correction Notes: | |
| **The responsible person’s signature on this compliance document affirms that all applicable requirements in this table have been met unless otherwise noted in the Verification Status and the Corrections Notes in this table.** | | |

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| **G. HERS-Verified Multiple Recirculation Loops for DHW Systems Serving Multiple Dwelling Units Requirements**  All distribution systems listed on this form shall comply with these requirements. | | |
| 01 | All buildings with 8 or more dwelling units have a **minimum** of 2 recirculation loops. | |
| 02 | Each loop roughly serves the same number of dwellings. | |
| 03 | Verification Status: | * Pass - all applicable requirements are met; or * Fail - one or more applicable requirements are not met. Enter reason for failure in corrections notes field below; or * All N/A - This entire table is not applicable |
| 04 | Correction Notes: | |
| **The responsible person’s signature on this compliance document affirms that all applicable requirements in this table have been met unless otherwise noted in the Verification Status and the Corrections Notes in this table.** | | |

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| **H. Determination of HERS Verification Compliance**  All applicable sections of this document shall indicate compliance with the specified verification protocol requirements in order for this Certificate of Verification as a whole to be determined to be in compliance. | |
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| **Documentation Author's Declaration Statement** | | | |
| 1. I certify that this Certificate of Verification documentation is accurate and complete. | | | |
| Documentation Author Name: | Documentation Author Signature: | | |
| Company: | Date Signed: | | |
| Address: | CEA/HERS Certification Information (if applicable): | | |
| City/State/Zip: | Phone: | | |
| **Responsible Person's Declaration statement** | | | |
| I certify the following under penalty of perjury, under the laws of the State of California:   1. The information provided on this Certificate of Verification is true and correct. 2. I am the certified HERS Rater who performed the verification identified and reported on this Certificate of Verification (responsible rater). 3. The installed features, materials, components, manufactured devices, or system performance diagnostic results that require HERS verification identified on this Certificate of Verification comply with the applicable requirements in Reference Appendices RA2, RA3, and the requirements specified on the Certificate of Compliance for the building approved by the enforcement agency. 4. The information reported on applicable sections of the Certificate(s) of Installation (CF2R) signed and submitted by the person(s) responsible for the construction or installation conforms to the requirements specified on the Certificate(s) of Compliance (CF1R) approved by the enforcement agency. 5. I will ensure that a registered copy of this Certificate of Verification 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 registered copy of this Certificate of Verification is required to be included with the documentation the builder provides to the building owner at occupancy. | | | |
| **BUILDER OR INSTALLER INFORMATION AS SHOWN ON THE CERTIFICATE OF INSTALLATION** | | | |
| Company Name (Installing Subcontractor, General Contractor, or Builder/Owner): | | | |
| Responsible Builder or Installer Name: | | CSLB License: | |
| **HERS PROVIDER DATA REGISTRY INFORMATION** | | | |
| Sample Group Number (if applicable): | | | Dwelling Test Status in Sample Group (if applicable): |
| **HERS RATER INFORMATION** | | | |
| HERS Rater Company Name: | | | |
| Responsible Rater Name: | | | Responsible Rater Signature: |
| Responsible Rater Certification Number w/ this HERS Provider: | | | Date Signed: |

**A. General Information**

This table reports the building location as specified on the Registered CF1R.

**B. Design HERS Verified Central Water Heating Systems Information**

This table reports the water heating system features that were specified on the registered CF1R compliance document for this project. For information only and requires no user input.

**C. Installed HER Verified Central Water Heating Systems Information (for performance compliance with heat pumps only)**

This table reports the water heating system information that is being installed. Require one line for each central system.

01 Water Heating System ID or Name – Reference information from CF1R.

02 Manufacturer/Model – User Input must be equal to or equivalent to Reference information from CF1R.

03 # of Water Heaters in System – Reference information from CF1R.

04 Tank Location – User Input must be equal to Reference

05 Exterior Insulation. R-Value – User input. Must be equal to or higher than value indicated on the CF1R. Value may be N/A if CF1R value is N/A.

**D. Design HERS Verified Water Heating Distribution Systems Information**

This table reports the water heating distribution types specified on the registered CF1R compliance document for this project.

**E. Installed HERS Verified Water Heating Distribution Systems Information**

01 Central DHW System Distribution Type - Reference information from CF1R.

02 Dwelling Unit DHW System Distribution Type - Reference information from CF1R.

**F. Mandatory Requirements for All Central Domestic Hot Water Recirculation Systems**

This table lists the requirements for all central recirculation systems. Installer must ensure all the requirements in this table are met.

**G. HERS-Verified Multiple Recirculation Loops for DHW Systems Serving Multiple Dwelling Units Requirements.**

All distribution systems listed on this form shall comply with these requirements

01 All buildings with 8 or more dwelling units have aminimum of 2 recirculation loops

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| **A. General Information** | | |
| 01 | Building Name | <<references values from CF1R>> |

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| **B. Design HERS Verified Water Heater System Information**  This table reports the water heating system(s specified on the registered CF1R compliance document for this project.  <<Prescriptive does not apply for heat pumps>> | | | | | |
| 01 | 02 | 03 | 04 | 05 | 06 |
| Water Heating System ID  or Name | Modeled Equipment  Make and Model | Number of Water Heaters | Tank Location | Exterior Tank Insulation R-value | Simulated Equipment  Make and Model |
| <<Reference values from CF1R-PRF-01 (see rule in header)>> | <<Reference values from CF1R-PRF-01>> | <<Reference values from CF1R-PRF-01 >> | << If CF1R-PRF-01, then, if TankOutside=true, then report ‘Outside’; if TankCond=true then ‘Conditioned’; if TankGarage=true, then ‘Garage’; else report TankZone;  reference CF1R>> | <<Reference Value from CF1R-PRF-01;  Else = NA>> | << hide column from user, needed for equivalency lookup;reference value from XML>> |
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| **C. Installed Water Heater System Information**  This table reports the water heating system(s specified on the registered CF1R compliance document for this project. | | | | |
| 01 | 02 | 03 | 04 | 05 |
| Water Heating System ID  or Name | Modeled Equipment  Make and Model | Number of Water Heaters | Tank Location | Exterior Tank Insulation R-value |
| <<reference values from B01>> | << User input is equal to B02 as default, and allow user to override with an equivalent system based on the simulated equipment in B06>> | << User Input must equal reference values from CF1R-PRF-01 (A03) reference values from CF1R>> | <<User input value; check value must be = value in A04 to comply, else flag non-compliant values and do not allow the doc to be registered.>> | << User Input must ≥ Reference Value from CF1R-PRF-01 Else = NA >> |
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| **D. Design HERS Verified Water Heating Distribution Systems Information**  This table reports the water heating distribution types specified on the registered CF1R compliance document for this project. | | |
| 01 | 02 | 03 |
| Water Heating System ID or Name | Central DHW System  Distribution Type | Dwelling Unit DHW System  Distribution Type |
| <<reference values from B01>> | <<reference values from CF1R. Allowed values are  \* Multi-family: Recirculating with temperature modulation;  \* Multi-family: Recirculating with temperature modulation and monitoring;  \* Multi-family: Recirculating demand control;  \* Multi-family: Recirculating with no control (continuous pumping)  \*Multi-family: No loops or recirc pump>> | <<reference values from CF1R  Allowed values are  \*Standard Distribution System  \*HERS-Verified Pipe Insulation>> |
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| **E. Installed HERS Verified Water Heating Distribution Systems Information**  This table reports the water heating distribution types specified on the registered CF1R compliance document for this project. | | |
| 01 | 02 | 03 |
| Water Heating System ID or Name | Central DHW System  Distribution Type | Dwelling Unit DHW System  Distribution Type |
| <<reference values from B01>> | << Reference value from D02>> | << Reference value from D03>> |
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| **F. Mandatory Requirements for All Central Domestic Hot Water Systems** | | |
| 01 | On systems that have a total capacity greater than 167,000 Btu/hr, outlets that require higher than service water temperatures as listed in the ASHRAE Handbook have separate remote heaters, heat exchangers, or boosters to supply the outlet with the higher temperature. (Section 110.3 (c)1) | |
| 02 | Systems with circulating pumps or with electrical heat trace systems shall be capable of automatically turning off the system. (Section 110.3(c)2). | |
| 03 | Unfired storage tanks are insulated with:   * External insulation of R-12, or * Internal insulation of R-16, or * The heat loss of the tank surface based on an 80°F water-air temperature difference shall be less than 6.5 Btuh/ft2. (Section 110.3(c)3). | |
| 04 | Recirculation loop shall meet the following requirements:   * + The recirculation pump is mounted on a vertical section of the return line, OR an automatic air release valve is installed on a riser at least 12 inches in length, on the inlet side of the recirculation pump, no more than 4 feet from the pump. (Section 110.3(c)4A).   + A check valve is located between the recirculation pump and the water heater. (Section 110.3(c)4B).   + A hose bibb is installed between the pump and the water heating equipment with an isolation valve between the hose bibb and the water heating equipment. 110.3(c)4C).   + Isolation valves shall be installed on both sides of the pump, of which the item C valve can be one. 110.3(c)4D   + The cold water piping and the recirculation loop piping shall not be connected to the hot water storage tank drain port. 110.3(c)4E   + A check valve shall be installed on the cold water supply line between the hot water system and the next closest tee on the cold water supply line. 110.3(c)4F. | |
| 06 | Instantaneous water heaters with an input greater than 6.8 kBTU/hr (2kW) shall have isolation valves on both the cold water supply and the hot water line. (110.3 (c)6). | |
| 07 | Verification Status: | * Pass - all applicable requirements are met; or * Fail - one or more applicable requirements are not met. Enter reason for failure in corrections notes field below; or * All N/A - This entire table is not applicable |
| 08 | Correction Notes: | |

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| **The responsible person’s signature on this compliance document affirms that all applicable requirements in this table have been met unless otherwise noted in the Verification Status and the Corrections Notes in this table.** |

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| **G. HERS-Verified Multiple Recirculation Loops for DHW Systems Serving Multiple Dwelling Units Requirements**  All distribution systems listed on this form shall comply with these requirements. | | |
| 01 | All buildings with 8 or more dwelling units have a **minimum** of 2 recirculation loops. | |
| 02 | Each loop roughly serves the same number of dwellings. | |
| 03 | Verification Status: | * Pass - all applicable requirements are met; or * Fail - one or more applicable requirements are not met. Enter reason for failure in corrections notes field below; or * All N/A - This entire table is not applicable |
| 04 | Correction Notes: | |
| **The responsible person’s signature on this compliance document affirms that all applicable requirements in this table have been met unless otherwise noted in the Verification Status and the Corrections Notes in this table.** | | |

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| **H. Determination of HERS Verification Compliance**  All applicable sections of this document shall indicate compliance with the specified verification protocol requirements in order for this Certificate of Verification as a whole to be determined to be in compliance. | |
| 01 | << if results for all applicable sections F and G ≠ fail, then display: Complies: All specified verification protocol requirements on this document are met; else display: Does not comply: One or more specified verification protocol requirements on this document are not met.>> |

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| **Documentation Author's Declaration Statement** | | | |
| 1. I certify that this Certificate of Verification documentation is accurate and complete. | | | |
| Documentation Author Name: | Documentation Author Signature: | | |
| Company: | Date Signed: | | |
| Address: | CEA/HERS Certification Information (if applicable): | | |
| City/State/Zip: | Phone: | | |
| **Responsible Person's Declaration statement** | | | |
| I certify the following under penalty of perjury, under the laws of the State of California:   1. The information provided on this Certificate of Verification is true and correct. 2. I am the certified HERS Rater who performed the verification identified and reported on this Certificate of Verification (responsible rater). 3. The installed features, materials, components, manufactured devices, or system performance diagnostic results that require HERS verification identified on this Certificate of Verification comply with the applicable requirements in Reference Appendices RA2, RA3, and the requirements specified on the Certificate of Compliance for the building approved by the enforcement agency. 4. The information reported on applicable sections of the Certificate(s) of Installation (CF2R) signed and submitted by the person(s) responsible for the construction or installation conforms to the requirements specified on the Certificate(s) of Compliance (CF1R) approved by the enforcement agency. 5. I will ensure that a registered copy of this Certificate of Verification 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 registered copy of this Certificate of Verification is required to be included with the documentation the builder provides to the building owner at occupancy. | | | |
| **BUILDER OR INSTALLER INFORMATION AS SHOWN ON THE CERTIFICATE OF INSTALLATION** | | | |
| Company Name (Installing Subcontractor, General Contractor, or Builder/Owner): | | | |
| Responsible Builder or Installer Name: | | CSLB License: | |
| **HERS PROVIDER DATA REGISTRY INFORMATION** | | | |
| Sample Group Number (if applicable): | | | Dwelling Test Status in Sample Group (if applicable): |
| **HERS RATER INFORMATION** | | | |
| HERS Rater Company Name: | | | |
| Responsible Rater Name: | | | Responsible Rater Signature: |
| Responsible Rater Certification Number w/ this HERS Provider: | | | Date Signed: |