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 Application Date: Date

**Identify Ventilation Systems in Sample Group (NA7.18.3)** 

Tested System	Building	Floor	Dwelling Units	Control/tag
	Building	Floor	Dwelling Units	Control System
	Building	Floor	Dwelling Units	Control System
	Building	Floor	Dwelling Units	Control System

	<ul><li>Construction inspection and functional testing comply</li><li>Does not comply</li></ul>	Date Submitted to AHJ: Date
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Intent:	The objective of this acceptance test is to verify the leakage of a new central
	ventilation duct system(s) (Section 160.2(b)2Ci) that serve multiple dwelling units
	and provides continuous airflows or are part of a balanced ventilation system to
	meet the requirements specified in Sections 160.2(b)2Aiv or 160.2(b)2Av. This test
	is restricted to multifamily buildings of four habitable stories or more. This
	compliance document is used to record the results of one system duct leakage test
	performed. These test procedures are based on ASTM E1554/1554M-13 (2018)
	Method D – Total duct leakage test. This test may can only be performed by a
	certified mechanical ATT. Reference §160.2(b)2A, §160.2(b)2C, and NA7.18.3.

Table A: Construction Inspection

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

Step	Entry	Item	Code Reference
1.1	Pass Fail	Access to required document NRCC-MCH-E <u>or</u> NRCC-PRF-E as approved by the authority having jurisdiction.	§10-103(a)2A
1.2	Pass Fail	Product specifications or tear sheets for the installed equipment.	NA7.18.3.2 (Step 8)
2.1, or	Pass Fail N/A	Verify that each system listed in the Sample Group serves more than six dwelling units and that the designer acknowledges that the duct system ducts will be pressurized to 50 Pa (0.2 inches water) with respect to outside. (Pass, Fail, N/A)	NA7.18.3, §160.2(b)2Ci
2.2	Pass Fail N/A	Verify that Eeach system <u>listed</u> in the Sample Group serves two to six dwelling units and that the designer acknowledges that the duct system ducts will be pressurized to 25 Pa (0.1 inches water) with respect to outside. (Pass, Fail, N/A)	

Step	Entry	Item	Code Reference
3.1, or	P, F, N/A	Testing at Rough-In. Verify that the spaces between the grille or register boots and the wallboard are sealed, and at least one grille or register is removed to verify proper sealing. (Pass, Fail, N/A)	NA7.18.3.2
3.2	P, F, N/A	Verify that the grilles or registers are installed (Pass, Fail, N/A)	NA7.18.3.2
4	Pass Fail	Confirm all windows and other openings are open to connect the building to the outside.	NA7.18.3.1(a)
5	Pass Fail	Confirm HVAC dampers are in their normal operating positions (NOP).	NA7.18.3.1(b)

Table B:	Functional Test	ing	
Step	Entry	Functional Test	Code Reference
1.0	No Entry	Measure and record environmental data:	NA7.18.3.2 (Step 1)
1.1	Enter Value	Outside (ambient) Temperature (°F)	NA7.18.3.2 (Step 1)
1.2	Enter Value	Indoor Temperature (°F)	NA7.18.3.2 (Step 1)
1.3	Enter Value	Barometric Pressure (inches Hg)	NA7.18.3.2 (Step 1)
2.0	☐ Pass ☐ Fail	Install static pressure probe in main plenum pointing into airstream induced by the test. If the test fan is on the roof, the static pressure probe will need to be connected to the measurement device at the test site with a tube long enough to make the connection.	NA7.18.3.2 (Step 2)
3.1, or	☐ Pass ☐ Fail ☐ N/A	Test fan is mounted inside, with the building open to the outside, . Uuse the building as reference pressure. (Pass, Fail, N/A)	NA7.18.3.2 (Step 3)
3.2	☐ Pass ☐ Fail ☐ N/A	Test fan is located on the roof, Uuse the outside as the reference pressure. (Pass, Fail, N/A)	NA7.18.3.2 (Step 3)
4.0	Pass FailNo Entry	Attach the test fan to the duct system, check one of the following.	NA7.18.3.2 (Step 4)

Step	Entry	Functional Test	Code Reference
4.1, or	☐ Pass ☐ Fail ☐ N/A	For roof top and wall mounted exhaust systems, remove the fan from the curb or opening and seal the test fan to the curb following test equipment manufacturer's instructions, making sure the dampers are open (NOP).  (Pass, Fail, N/A)	NA7.18.3.2 (Step 4a)
4.2	☐ Pass ☐ Fail ☐ N/A	Alternatively, the test fan may be applied to a grille opening on the inside of the building following test equipment manufacturer's instructions. (Pass, Fail, N/A)	NA7.18.3.2 (Step 4b)
5.0	Pass FailNo Entry	Temporarily seal the system including:	NA7.18.3.2 (Step 5)
5.1	Pass Fail	All of the grilles on the system using masking tape and air impermeable sheeting or duct mask made for this application.	NA7.18.3.2 (Step 5a)
5.2	Pass Fail	Air handler access door or panel (do not use permanent sealing material, metal tape is acceptable).	NA7.18.3.2 (Step 5b)
5.3	P, F, N/A	For systems with an air handler with supply and return plenums, the entire duct system including the air handler must be included in the test. (Pass, Fail, N/A)	NA7.18.3.2 (Step 5c)
6.0	Pass Fail	Adjust the test fan speed to maintain 25 Pa or 50 Pa as appropriate at the static pressure probe location.	NA7.18.3.2 (Step 6)
7.0	No Entry	Record the following:	NA7.18.3.2 (Step 7)
7.1	Enter Value	Air Flow (CFM)	NA7.18.3.2 (Step 7)
7.2	Enter Value	Temperature (°F)	NA7.18.3.2 (Step 7)
8.0	Enter Value	Determine the nominal fan airflow using the product specifications of the installed equipment for the design static pressure. (CFM)	NA7.18.3.2 (Step 8)
9.0	Enter Value	Divide the duct leakage flow (Step 7.1) by the nominal fan flow (Step 8) and convert to a percentage (multiply by 100).	NA7.18.3.2 (Step 9)
<del>10.0</del>	No Entry	Measure and record environmental data:	NA7.18.3.2 (Step 1)
10.1	Enter Value	Outside (ambient) Temperature (°F)	NA7.18.3.2 (Step 1)
10.2	Enter Value	Indoor Temperature (°F)	NA7.18.3.2 (Step 1)

Step	Entry	Functional Test	Code Reference
10.3	Enter Value	Barometric Pressure (inches Hg)	NA7.18.3.2 (Step 1)
1 <u>0</u> 1.0	Pass Fail	If the duct leakage flow percentage (Step 9) is equal to or less than the target compliance criterion of 6% leakage the system passes.	NA7.18.3.2 (Step 9), §160.2(b)2Ci



Declaration Statement	Signatory
Document Author	Name
I assert that this Certificate of Acceptance documentation is accurate and complete.	Company Name
	Author Signature
	Date Signed
Field Technician	
I certify the following under penalty of perjury, under the laws of the State of California:	Name
The information provided on this Certificate of Acceptance is true and correct. I am the person who	Company Name
performed the acceptance verification reported on this Certificate of Acceptance (Field Technician). The	ATT No.: ATT Cert. No.
construction or installation identified on this Certificate of Acceptance complies with the applicable	Title
acceptance requirements indicated in the plans and specifications approved by the enforcement agency	Phone
and conforms to the applicable acceptance requirements and procedures specified in Reference	Signature
Nonresidential Appendix NA7. I have confirmed that the Certificate(s) of Installation for the construction or	Date Signed
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.	
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	Name
(responsible acceptance person). The information provided on this Certificate of Acceptance substantiates	Company Name
that the construction or installation identified on this Certificate of Acceptance complies with the	Lic. No.: License No.
acceptance requirements indicated in the plans and specifications approved by the enforcement agency	Title
and conforms to the applicable acceptance requirements and procedures specified in Reference	Phone
Nonresidential Appendix NA7. I have confirmed that the Certificate(s) of Installation for the construction	Signature
or installation identified on this Certificate of Acceptance has been completed and is posted or made	Date Signed
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.	