



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

Building: Enter Value	Floor: Enter Value	Room: Enter Value	Control/tag: Value
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<input type="checkbox"/> Construction inspection and functional testing comply <input type="checkbox"/> Does not comply	Date Submitted to AHJ: Date
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Intent:	Verify that the supply fan speed in a variable air volume system modulates to meet system airflow demand. Either an NRCC-MCH-E for nonresidential construction that is completed and approved by the authority having jurisdiction <u>or NRCC-PRF-E for the performance path</u> or an LMCC-MCH-E <u>or LMCC-PRF-E</u> for multifamily construction that is registered with a CEC approved <u>HERSECC</u> data registry is required prior to beginning this acceptance test. Submit one Certificate of Acceptance for each system that must demonstrate compliance. NRCA-MCH-07-A can be performed in conjunction with NRCA-MCH-02-A Outdoor Air Acceptance since testing activities overlap. Reference: §140.4(c)2, §170.2(c)4Aii, and NA7.5.6
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Table A: Construction Inspection

Prior to functional testing, verify and document all of the following for each system or control.

Step	Entry	Item	Code Reference
1	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the NRCC-MCH-E as approved by the authority having jurisdiction <u>or NRCC-PRF-E for the performance path</u> -or LMCC-MCH-E <u>or LMCC-PRF-E</u> as registered by an <u>CECECC</u> approved HERS data registry is available for reference.	<u>N/A §10-103(a)2A</u>
2	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the supply fan includes device(s) for modulating airflow, such as variable speed drive or electrically commutated motor.	NA7.5.6.1(a)
3.0	No Entry	<u>For multiple zone systems, verify that discharge static pressure sensors are either factory calibrated or field-calibrated by verifying one of the following: Steps 3.1 or 3.2.</u>	NA7.5.6.1(b)1
3.1, or	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Factory calibrated.	NA7.5.6.1(b)1

Step	Entry	Item	Code Reference
3.2	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	<p>Field calibrationed.:</p> <ul style="list-style-type: none"> • Measure static pressure as close to the existing sensor as possible using a calibrated hand-held measuring device. • Compare the field-measured value to the value measured by the Building Automation System (BAS). • When the value measured by the BAS is within 10 percent of the field-measured value, the sensor is calibrated. <p>(Pass, Fail, or N/A)</p>	NA7.5.6.1(b)1
4.0	No Entry	Verify that the static pressure location, setpoint, and reset control meet the requirements of §140.4(c)2A and §140.4(c)2B (if applicable) or §170.2(c)4Aiia and §170.2(c)4Aiib (if applicable) by completing all of Step 4: Complete 4.1 or 4.2 and then complete 4.3.	NA7.5.6.1(b)2
4.1, or	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Verify that the set point is no greater than one-third of the total design fan static pressure. (Pass, Fail, or N/A)	§140.4(c)2A, §170.2(c)4Aiia, NRCC-MCH-E Table J, LMCC-MCH-E Table J
4.2, and	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	If the system includes a direct digital control of individual zone boxes reporting to the central control panel, then verify that the static pressure setpoints are able to be reset based on the zone requiring the most pressure (i.e., the set point is reset lower until one zone damper is nearly wide open). (Pass, Fail, or N/A)	§140.4(c)2B, §170.2(c)4Aiib
4.3	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	If the static pressure sensor is located downstream of major duct splits, then verify that multiple sensors are installed in each major branch with fan capacity controlled to satisfy the sensor furthest below its setpoint. (Pass, Fail, or N/A)	§140.4(c)2A, §170.2(c)4Aiia
5	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Check "Pass" if construction inspection complies with all requirements. Check "Fail" if construction inspection does not comply with all requirements.	N/A

Table B: Functional Testing

Step	Entry	Functional Test	Code Reference
1.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Simulate demand for full design airflow for all of Step 1.	NA7.5.6.2 Step 1
1.1	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the supply fan controls modulate to increase capacity.	NA7.5.6.2 Step 1(a)
1.2	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	For multiple zone system, verify that the supply fan maintains discharge static pressure within +/- 10 percent of the current operating setpoint. (Pass, Fail, or N/A)	NA7.5.6.2 Step 1(b)
1.3	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the supply fan controls stabilize within a 5-minute period.	NA7.5.6.2 Step 1(c)
2.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Simulate demand for reduced or minimum airflow for all of Step 2.	NA7.5.6.2 Step 2
2.1	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the supply fan controls modulate to decrease capacity.	NA7.5.6.2 Step 2(d)
2.2	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	For systems with DDC to the zone level, verify that the current operating setpoint has decreased. (Pass, Fail, or N/A)	NA7.5.6.2 Step 2(e)
2.3	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	For multiple zone system, verify that the supply fan maintains discharge static pressure within +/- 10 percent of the current operating setpoint. (Pass, Fail, or N/A)	NA7.5.6.2 Step 2(f)
2.4	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the supply fan controls stabilize within a 5-minute period.	NA7.5.6.2 Step 2(g)
3	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Restore system to normal operating conditions.	NA7.5.6.2 Step 3
4	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Check pass if Functional Test passes on Steps 1 through 3	N/A



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