



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	Date Submitted to AHJ: Date
<input type="checkbox"/> Does not comply	

Intent:	<u>Refrigerated warehouse evaporators and fan control acceptance test.</u> Verify that the evaporator fans are controlled to modulate their speed in response to space temperature or relative humidity changes. Submit one Certificate of Acceptance for each system that must demonstrate compliance. Reference Section 120.6(a)7B, NA7.10.2.
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Table A: Construction Inspection

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

Step	Entry	Item	Code Reference
1.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Access to required document NRCC- MCH PRC-E or LMCC-MCH-E as approved by the authority having jurisdiction.	10-103(a)2A
2.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	All refrigerated space temperature and humidity sensors used for control are verified to read accurately (or provide an appropriate offset) using a temperature and humidity standard.	NA7.10.2.1(a) NA7.10.2.1(b)
3.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	All refrigerated space temperature and humidity sensors used for control are mounted in a location away from direct evaporator discharge air draft.	NA7.10.2.1(c)
4.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	All fan motors are operational and rotating in the correct direction.	NA7.10.2.1(d)
5.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Fan speed control is operational and connected to evaporator fan motors.	NA7.10.2.1(e)
6.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	All speed controls are in "auto" mode.	NA7.10.2.1(f)
7.0	<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	Disable any conflicting controls (such as defrost override) if currently active.	N/A
2.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Measure current space temperature or humidity. Program this temperature or humidity as the test temperature or humidity setpoint into the control system for the functional test steps. Allow 5 minutes for system to normalize.	NA7.10.2.2 (Step 1)
3.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Using the control system, lower test temperature or humidity setpoint in 1 degree or 1% RH increments below any control dead band range and verify both of the following occur: <ul style="list-style-type: none">The evaporator fan controls modulate to increase fan motor speed; <u>and</u>The evaporator fan motor speed increases in response to controls.	NA7.10.2.2 (Step 2)
4.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Using the control system, raise the test temperature or humidity setpoint in 1 degree or 1% RH increments above any control dead band range and verify the following occur: <ul style="list-style-type: none">Evaporator fan controls modulate to decrease fan motor speed; <u>and</u>Evaporator fan motor speed decreases in response to controls; <u>and</u>The fan does not dip below the minimum fan motor control speed (rpm or percent of full speed);	NA7.10.2.2 (Step 3)
<u>4.1</u>	<u>Enter Value</u>	<u>Minimum fan motor control speed (rpm or percent of full speed).</u>	<u>NA7.10.2.2 (Step 3)</u>
5.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Restore control system to original zone space setpoint and restore controls disabled in Step 1.	NA7.10.2.2 (Step 4)
6.0	<input type="checkbox"/> Pass <input type="checkbox"/> Fail	Verify that the Functional Test is completed and complies with all requirements.	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
Field Technician I assert 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