

## Site Information

Job #: \_\_\_\_\_

Rater: \_\_\_\_\_

Date: \_\_\_\_\_

Builder: \_\_\_\_\_

Subdivision: \_\_\_\_\_

City: \_\_\_\_\_

Superintendent: \_\_\_\_\_

Phone #: \_\_\_\_\_

Lot #: \_\_\_\_\_

Address: \_\_\_\_\_

Plan: \_\_\_\_\_

SF: \_\_\_\_\_ Stories \_\_\_\_\_

## HERS Verifications

DT:

EER:

RCM:

INF:

AF:

FW:

QII:

LLAH:

DCS:

SA:

BD:

## Above Code Verifications

TBC:

RB:

DHW:

Glass:

## Insulation Summary

### Attic

Ceiling \_\_\_\_\_  
 FAU Platform \_\_\_\_\_

	Target	Results
Height		
Weight		
Rulers		
Days Installed		

### Walls

2x4 Framing: \_\_\_\_\_  
 2x6 Framing: \_\_\_\_\_  
 Continuous Insulation \_\_\_\_\_

### Foundations

Floor Over Garage/Exterior \_\_\_\_\_  
 Raised Subfloor \_\_\_\_\_  
 Slab Edge \_\_\_\_\_

## CF-4R-ENV-21

### Floor Air Barrier

Yes No N/A

1			
2			

### Walls Air Barrier

Yes No N/A

3			
4			
5			
6			

### Attic Inspection

Yes No N/A

7			
8			
9			
10			

### Ceiling Air Barrier

Yes No N/A

11			
12			
13			
14			
15			
16			

### Garage Roof

Yes No N/A

17			
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### Garage Roof

Yes No N/A

18			
19			

## CF-4R-ENV-22 (Page 1 of 2)

### Insulation Stage

Yes No N/A

1			
2			
3			
4			
5			
6			
7			
8			

### Wall Insulation

Yes No N/A

16			
17			
18			
19			
20			
21			
22			
23			
24			

### Wall Insulation

Yes No N/A

9			
10			
11			
12			
13			
14			
15			

### Ceiling Insulation

Yes No N/A

25			
26			
27			
28			
29			
30			

## CF-4R-ENV-22 (Page 2 of 2)

### Ceiling Insulation

Yes No N/A

31			
32			
33			
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			

### Garage Roof

Yes No N/A

48			
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### Garage Roof

Yes No N/A

49			
50			

## Thermal Bypass (Page 1 of 2)

### Floor

Yes No N/A

1			
2			
3			
4			
5			
6			
7			

### Walls

Yes No N/A

8			
9			
10			
11			
12			
13			
14			
15			

Yes No N/A

16			
17			
18			
19			
20			
21			
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27			
28			
29			

## Thermal Bypass (Page 2 of 2)

### Roof Prep

Yes No N/A

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35

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37

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39

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### Roof Batt

Yes No N/A

40

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41

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42

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43

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44

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Yes No N/A

45

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46

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### Loose Fill

Yes No N/A

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## Above Code Verifications

### Thermal Bypass Checklist

Results: ☐ Pass ☐ Fail

### Radiant Barrier Required

Results: ☐ Pass ☐ Fail

### Water Heater

Model No: \_\_\_\_\_

### Windows

	Target	Actual
	U-Value SHGC	U-Value SHGC
Oper	_____	_____
FX	_____	_____
SGD	_____	_____
FD	_____	_____

## Moisture Content

Location	%

Results: ☐ Pass ☐ Fail

## Ducts in Conditioned Space

Entire duct system in conditioned space

Yes ☐

No ☐

Less than 12 feet of duct in Unconditioned

Yes ☐

No ☐

## Ducts Surface Area

Refer to duct layout drawings and verify  
insulation follows designs

Results: ☐ Pass ☐ Fail

## Buried Ducts

Yes ☐

No ☐

## Notes