



Planning & Development Department

320 E Jefferson Blvd, Dallas TX 75203

(214) 948-4480

Residential Energy Compliance Certificate Energy Code Requirements of the 2021 IRC (IECC)

Email this form to bigreencode@dallascityhall.com prior to
building final inspection

Project Address: _____ Permit Number: _____

BUILDING THERMAL ENVELOPE TESTING VERIFICATION

Building Thermal Envelope Leakage Testing (R402.4.1.2):

_____ ACH50 _____ CFM per SF of dwelling unit enclosure*

I certify that I have conducted an **air leakage test** and it has passed the requirements of the **2021 International Energy Conservation Code, as amended locally**. I further certify the testing was conducted in accordance with ANSI/RESNET/ICC 380, ASTM E779, or ASTM E1827 and that I am a third party as approved by the building official.

Agency and Certification Number: _____

Signature of Responsible Party: _____

Printed Name and Title of Responsible Party: _____

DUCT LEAKAGE TESTING VERIFICATION

Rough-In Test Option (R403.3.5.1.)

Post Construction Test Option (R403.3.5.2)

System #1 - _____ CFM25 System #2 - _____ CFM25 System #3 - _____ CFM25

System #4 - _____ CFM25 System #5 - _____ CFM25 System #6 - _____ CFM25

I certify that I have conducted a **total duct leakage test** and it has passed the requirements of the **2021 International Energy Conservation Code, as amended locally**. I further certify that the testing was conducted in accordance with ANSI/RESNET/ICC 380 or ASTM E1554.

Agency and Certification Number: _____

Signature of Responsible Party: _____

Printed Name and Title of Responsible Party: _____

MECHANICAL VENTILATION AIRFLOW TESTING VERIFICATION

Whole house System #1 - _____ CFM Whole house System #2 - _____ CFM

Exhaust System #1 - _____ CFM Exhaust System #2 - _____ CFM Exhaust System #3 - _____ CFM

Exhaust System #4 - _____ CFM Exhaust System #5 - _____ CFM Exhaust System #6 - _____ CFM

I certify that I have conducted **whole-dwelling mechanical ventilation airflow and exhaust ventilation airflow tests** and they have passed the requirements of the **2021 International Residential Code or International Mechanical Code as applicable and as amended locally**. I further certify that I am a third party as approved by the building official.

COD 3rd Party Provider: _____ COD Registration #: _____

Signature of Responsible Party: _____ Certification #: _____

Printed Name and Title of Responsible Party: _____ Date: _____

* Per R402.4.1.2 and R402.4.1.3: The maximum infiltration rate for Option 1 Prescriptive Path is 5 ACH in Climate Zone 2 or 3 ACH in Climate Zone 3. The maximum infiltration rate for all other compliance paths and climate zones is 5 ACH or 0.28 CFM per SF of dwelling unit enclosure.