

Appendix C- Required Energy Analysis Forms

| | |
|----------------------|------------------|
| Project Name: | QAP Year: |
| Address: | |

| MECHANICAL EQUIPMENT | MINIMUM REQUIREMENT | PROJECT USE Y - N - N/A | WHERE DOCUMENTED? PLANS PAGE # OR OTHER |
|---|---|-------------------------------|---|
| ACCA Manual J/S or equivalent Sizing Report | Required | | |
| Return Air Balancing System | In dwelling units with ≥ 2 BRs, pressure difference with BR door closed and air handler running is ≤ 3 pascals. | | |
| Conventional Forced Air Furnace | ≥ 90 AFUE | | |
| Split System Central A/C and Air source heat pumps up to 135,000 Btuh | ≥ 13 SEER or ≥ 8.0 HSPF and 11 EER | | |
| Thermostatic Expansion Valves in AC | Required | | |
| HVAC System Leakage | ≤ 6 cfm or less/100 sq ft living space | | |
| Combination Space Heating/Water Heater | $\geq 79\%$ Recovery Efficiency and 0.61 Energy Factor | | |
| Water Heater Only | ≥ 0.61 Energy Factor Or ≥ 0.58 Energy Factor with R 12 blanket | | |
| Mechanical Fresh Air Ventilation System | Provide 15 CFM fresh air per occupant, operable windows do NOT qualify | | |
| Combustion Appliances inside conditioned space | Power vented or direct-power vented unit. | | |

Hot Water Conservation Requirements – please check to verify use in project

- Showerheads - Use ≤ 2.5 gallons per minute
- Faucets - Use ≤ 2.0 gallons per minute

**** Note where in submittal information is located.**

If information is on a plan sheet, note page number, if on Audit Form Sheets, note AF, if in separate report, note (Title) Report.

| BUILDING ENVELOPE | NORTHERN , RURAL | SOUTHERN | PROJECT USE Y - N - N/A | WHERE SUBMITTED PAGE # OR AUDIT FORM |
|---|-----------------------------|----------------------------|------------------------------------|---|
| ATTIC /CEILING | R38 | R30 | | |
| WALLS | R19/ R21 L. Tahoe | R15 | | |
| BAND JOISTS | R19/ R21 L. Tahoe | R15 | | |
| FLOORS OVER CRAWL SPACES | R19 | R15 | | |
| SLAB FOUNDATIONS | R10 Perimeter | NA | | |
| WINDOWS | U-Factor 0.31 SHGC 0.35 | U Factor 0.35 SHGC 0.30 | | |
| <p>Note on Prescriptive Building Envelope Efficiency Minimums In order to complete the energy use analysis please provide information as it pertains to this project. Efficiency must be equal to or greater than required minimums, unless an energy use analysis using an approved method demonstrates that the building and individual unit energy performance is equal to or greater than the EPA Energy Star Home program.</p> | | | | |

| LIGHTS APPLIANCES | REQUIREMENT | PROJECT USE IN DWELLING UNITS Y - N - N/A | MAKE & MODEL # (IF KNOWN) |
|------------------------------|--------------------------------------|--|--|
| Ceiling Fans | Reversible, Energy Star Qualified | | |
| Light Fixtures | Energy Star Qualified | | |
| Refrigerators | Energy Star Labeled | | |
| Dishwashers | Energy Star Labeled | | |
| Clothes Washers | Energy Star Labeled | | |

**Please include on a disk or email as pdf's:
site plan, building and unit floor plans, elevations, mechanical plans, window
and door schedules, plumbing plans**

Please answer these questions for units / dwellings in the project.

| | | | |
|------------------------------------|------------|------------|------------|
| Total Number of Unit Types: | | | |
| 1st Floor _____ | 1 BR _____ | 2 BR _____ | 3 BR _____ |
| 2nd Floor _____ | 1 BR _____ | 2 BR _____ | 3 BR _____ |
| 3rd Floor _____ | 1 BR _____ | 2 BR _____ | 3 BR _____ |
| 4th Floor _____ | 1 BR _____ | 2 BR _____ | 3 BR _____ |

| |
|--|
| Flat Ceiling Height () 8 Ft () 10 Ft () Other _____ ft |
|--|

| |
|--|
| Floor Area Over Garage? () No () Yes _____ R Value _____ |
| Any Cantilever Floor area? () No () Yes _____ R Value _____ |

Crawlspace Foundations Only

| |
|--|
| Is Crawl Space Vented () Operable vents () Unvented () Open |
| Total Crawl Height _____ ft Height below grade only _____ ft |

Slab Foundations Only

| |
|---|
| Type of Insulation if applicable _____ |
|---|

Ceiling Type & Insulation

Roof Type () Tile () Asphalt () Other _____ Framing 2x____: ____oc

Roof Pitch () 4 in 12 () 5 in 12 () Other _____

Where is insulation located? () on ceiling () under roof sheathing

Vault Ceilings on top floor () No () Yes

Roof Exterior Color () Light () Medium () Dark **Radiant Barrier** () Yes () No

Wall Type & Insulation

() Standard Stud Frame () Other _____ () 2x4 () 2x6 () Other _____

Will foam board be applied as exterior sheathing? () Yes () No

Mechanical Systems – Dwelling Units

Heating Systems

Type () Furnace () Combo w/Water Heater () Other _____

Size (s) _____ kBtu

Fuel Type () Natural gas () Propane _____ **Location** _____

Cooling Systems

Size (s) _____ ton

Hot Water Heaters

Energy Factor _____ **Size** _____ gal

Type () Natural gas () Propane **Location** _____

Return Air System

() Transfer Grilles () Jump Ducts () Other _____

Heating and Cooling System Ducts

Supply Ducts Location _____ R _____

Type () Flex duct () Other _____

Return Ducts Location _____

Type () Flex duct () Other _____

Indoor Air Quality Fresh Air Ventilation Equipment

Manufacturer _____ **Model #** _____