

**Residential - Duct Sealing Certificate  
Due at Rough-In Inspection**

Building Permit Number:

Contractor Name:

Owner Name:

Address:

Address:

Phone:

Phone:

Location of Work:

The duct tightness was tested by the above referenced contractor.

**If all ducts are not located within conditioned space, builder must verify one of the following: Post Construction duct leakage to outdoors (PCO) is  $\leq$  8 CFM/100 ft<sup>2</sup> Post Construction total duct leakage (PCT) is  $\leq$  12 CFM/100 ft<sup>2</sup>. Rough-In total Leakage (RIT) is  $\leq$  6 CFM/100 ft<sup>2</sup>.**

**State which method was used to conduct the duct tightness test:**

**Duct Blower (DB), Modified Blower Door Subtraction Method (MBDS), or Automated Multipoint Blower Door (AMBD).**

**Table**

System Unit	Test (PCO, PCT, RIT)	Method (DB, MBDS, AMBD)	Test Result CFM/100 sq. ft.
1	PCO PCT RIT	DB MBDS AMBD	
2	PCO PCT RIT	DB MSDS AMBD	
3	PCO PCT RIT	DB MSDS AMBD	

**Certification**

The Contractor hereby certifies the above referenced duct tightness test was done in accordance with the specification established by the 2009 International Energy Conservation Code Section 403.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature of Contractor/Third Party Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Date

\_\_\_\_\_  
Notary State Commission

\_\_\_\_\_  
Notary Expiration Date