

MEASURE 7: ENERGY FLOWS AND ENERGY FUTURE

Total EUI (kBtu/sf/yr)

Total energy use by the facility including energy purchased from utilities and provided by on-site renewable sources.

- Per T24 UTIL-1R form (last sheet in the attachment I emailed), site energy data (proposed building):
 - CFA= 46,320 sf
 - natural gas= 5217 therms= 521,700 kBTU
 - electricity= 216,712- 75,884 (plug)- 84,988 (ltg)= 55,840 kWh= 190,526 kBTU
 - TOTAL = 712,226 kBTU/ 46,320 SF= 15.38 kBTU/sf/yr
 - --> much lower the MF EUI= 50 per the table.
 - **Add back in ltg + plug loads:**
 - TOTAL= 1,261,121/ 46320= **27.2 kBTU/sf/yr = 46% reduction from 50**
 - **Note that the initial calc subtracted lighting & plug loads** to be consistent w/ modeling for lowrise, and to match how this is handled by green & incentives programs. But given how obviously low the resulting value was compared to baseline, I thought it best to add those nos. back in

Net EUI (kBtu/sf/yr)

Net purchased energy use (total energy use, less any energy generated on-site from renewable resources).

- [from SLP June '11]

expected ANNUAL kWh power production with the modified PV system (modified by CO #1) is 7,866 + 38,925 = **46,791 kWh = 159,650 kBtu**
- --> **159,650 / 1,261,121 = 12.7% reduction from total**
- **Net purchased= 1,101,471 kBtu/yr = 23.8 kBTU/sf/yr**

Percent Reduction from National Average EUI for Building Type

Use EPA's [Target Finder](#) to establish your baseline for percent reduction(window #3). If your building type isn't available in Target Finder, refer to AIA's 2030 Commitment Reporting Tool, available on the Call for Entries page, for national averages and alternate options.

- Multifamily 5 or more units: EUI= 50 kBTU/sf/yr
- See above: 27.2 kBTU/sf/yr = **46% reduction from 50 (or if using post-PV value of 23.8, 52% reduction)**
- **Lighting Power Density in (watts/sf)**
Describe impact of lighting controls to be described in narrative
 - You may want to contact JG Engineers for input on this.
 - But, based on their elec. sheet E1.1 LTG-1C form (indoor lighting) worksheet:
 - installed watts= 9160, allowed= 14,904--> **39% reduction**
 - 21,047 sq.ft--> **.435W/sq.ft**
 - **NOTE** the above info only covers the non-res spaces (corridors, office, comm. room etc.) The units are covered under T24 mandatory measures.

Upload Energy Data Attachment

Options include: LEED EA Prerequisite 2 submittal, Title 24 report, or summary of energy modeling results **Remove all firm names from PDFs.**

- EnergySoft's Title 24 report (as revised for HMG/incentives program late 2010) attached

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BUILDING ENERGY ANALYSIS REPORT

PROJECT:

6th and Oak Street Apartments
609 Oak Street
Oakland, CA

Project Designer:

NAME REMOVED

Report Prepared by:

L. Chappell, CEPE R/NR
EnergySoft, LLC
1025 5th Street, Suite A
Novato, CA 94945
(415) 897-6400

Job Number:

09079

Date:

11/12/2010

The EnergyPro computer program has been used to perform the calculations summarized in this compliance report. This program has approval and is authorized by the California Energy Commission for use with both the Residential and Nonresidential 2008 Building Energy Efficiency Standards.

This program developed by EnergySoft, LLC – www.energysoft.com.

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PERFORMANCE CERTIFICATE OF COMPLIANCE (Part 1 of 3) **PERF-1C**

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>CA Climate Zone 03</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>


GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Relocatable - indicate	<input type="checkbox"/> specific climate zone	<input type="checkbox"/> all climates
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration

STATEMENT OF COMPLIANCE
 This certificate of compliance lists the building features and specifications needed to comply with Title 24, Parts 1 and 6 of the California Code of Regulations. This certificate applies only to a Building using the performance compliance approach.

The documentation author hereby certifies that the documentation is accurate and complete.

Documentation Author

Name <i>L. Chappell, CEPE R/NR</i>	Signature 
Company <i>EnergySoft, LLC</i>	Date <i>11/12/2010</i>
Address <i>1025 5th Street, Suite A</i>	Phone <i>(415) 897-6400</i>
City/State/Zip <i>Novato, CA 94945</i>	

The Principal Designer hereby certifies that the proposed building design represented in this set of construction documents is consistent with the other compliance forms and worksheets, with the specifications, and with any other calculations submitted with this permit application. The proposed building has been designed to meet the energy efficiency requirements contained in sections 110, 116 through 118, and 140 through 149 of Title 24, Part 6. Please check one:

ENV.	LTG.	MECH.	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I hereby affirm that I am eligible under the provisions of Division 3 of the Business and Professions Code to sign this document as the person responsible for its preparation; and that I am licensed in the State of California as a civil engineer, mechanical engineer, electrical engineer, or I am a licensed architect.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I affirm that I am eligible under the provisions of Division 3 of the Business and Professions Code by section 5537.2 or 6737.3 to sign this document as the person responsible for its preparation; and that I am a licensed contractor performing this work.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I affirm that I am eligible under Division 3 of the Business and Professions Code to sign this document because it pertains to a structure or type of work described as exempt pursuant to Business and Professions Code Sections 5537, 5538 and 6737.1.

Principal Envelope Designer

Name	Signature
Company	Date
Address	License #
City/State/Zip	Phone

Principal Mechanical Designer

Name	Signature
Company	Date
Address	License #
City/State/Zip	Phone

Principal Lighting Designer

Name	Signature
Company	Date
Address	License #
City/State/Zip	Phone

INSTRUCTIONS TO APPLICANT COMPLIANCE & WORKSHEETS (check box if worksheets are included)

<input checked="" type="checkbox"/> ENV-1C	Certificate of Compliance. Required on plans.	<input checked="" type="checkbox"/> MECH-1C	Certificate of Compliance. Required on plans.
<input checked="" type="checkbox"/> LTG-1C	Certificate of Compliance. Required on plans.	<input checked="" type="checkbox"/> MECH-2C	Air/Water Side/Service Hot Water & Pool Requirements.
<input checked="" type="checkbox"/> LTG-2C	Lighting Controls Credit Worksheet.	<input checked="" type="checkbox"/> MECH-3C	Mechanical Ventilation and Reheat.
<input type="checkbox"/> LTG-3C	Indoor Lighting Power Allowance.	<input checked="" type="checkbox"/> MECH-5C	Mechanical Equipment Details.

PERFORMANCE CERTIFICATE OF COMPLIANCE

(Part 2 of 3)

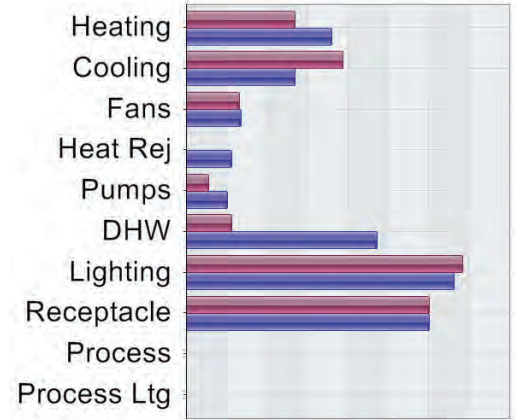
PERF-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

ANNUAL TDV ENERGY USE SUMMARY (kBtu/sqft-yr)

Energy Component	Standard Design	Proposed Design	Compliance Margin
Space Heating	18.03	13.47	4.56
Space Cooling	13.48	19.41	-5.93
Indoor Fans	6.74	6.58	0.17
Heat Rejection	5.61	0.00	5.61
Pumps & Misc.	5.03	2.78	2.25
Domestic Hot Water	23.56	5.60	17.96
Lighting	33.14	34.21	-1.06
Receptacle	30.00	30.00	0.00
Process	0.00	0.00	0.00
Process Lighting	0.00	0.00	0.00
TOTALS	135.61	112.06	23.55



Percent better than Standard 17.4 % (17.4 % excluding process)

BUILDING COMPLIES

GENERAL INFORMATION

Building Orientation	(SE) 150 deg	Conditioned Floor Area	46,320	sqft.
Number of Stories	6	Unconditioned Floor Area	0	sqft.
Number of Systems	150	Conditioned Footprint Area	9,702	sqft.
Number of Zones	34	Natural Gas Available On Site	Yes	

	Orientation	Gross Area	Glazing Area	Glazing Ratio
Front Elevation	(SE)	6,753 sqft.	2,451 sqft.	36.3 %
Left Elevation	(SW)	8,853 sqft.	3,910 sqft.	44.2 %
Rear Elevation	(NW)	6,030 sqft.	1,057 sqft.	17.5 %
Right Elevation	(NE)	8,893 sqft.	4,602 sqft.	51.7 %
Total		30,530 sqft.	12,020 sqft.	39.4 %
Roof		8,989 sqft.	0 sqft.	0.0 %

	Standard	Proposed	Prescriptive Values for Comparison only. See LTG-1C for allowed LPD.
Prescriptive Lighting Power Density	0.798 W/sqft.	0.897 W/sqft.	
Prescriptive Envelope TDV Energy	1,206,402	1,194,085	

Remarks:

PERFORMANCE CERTIFICATE OF COMPLIANCE

(Part 3 of 3)

PERF-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

ZONE INFORMATION

System Name	Zone Name	Occupancy Type	Floor Area (sqft.)	Inst. LPD (W/sf) ¹	Ctrl. Credits (W/sf) ²	Allowed LPD		Proc. Loads (W/sf)
						Area (W/sf) ³	Tailored (W/sf) ⁴	
FC-1.1, 1.2	L1 Community Room	Convention/Conference/Mee	690	1.016	0.203			
FC-1.3	L1 Service Office	Office <= 250 sqft	144	1.292	0.258			
FC-2.1	L1 Management Office	Office > 250 sqft	541	0.817	0.069			
FC-2.2	L1 Conference Room	Convention/Conference/Mee	132	0.705	0.141			
FC-2.3	L1 Manager's Office	Office <= 250 sqft	242	0.769	0.154			
DS-1	Elevator Machine Room	Electrical, Mechanical Room	95	1.312				
L1 HP 1	L1 Entry Lobby	Lobby, Main Entry	528	1.515				
L1 HP 2	L1 Laundry	Laundry	282	0.830	0.166			
	L1 Unconditioned Area	Electrical, Mechanical Room	1,111	*0.700				
MU-1	L6 Corridor	Corridor/Restroom/Support	1,082	0.909	0.034			
	L5 Corridor	Corridor/Restroom/Support	1,082	0.909	0.034			
	L4 Corridor	Corridor/Restroom/Support	1,082	0.909	0.034			
	L3 Corridor	Corridor/Restroom/Support	1,082	0.909	0.034			
	L2 Corridor	Corridor/Restroom/Support	1,028	0.957	0.036			
L2 Wall Heater #201-214	L2 Room North Wing	High-Rise Residential Living	1,224	*0.500				
	L2 Room East Wing	High-Rise Residential Living	2,663	*0.500				
	L2 Room South Wing	High-Rise Residential Living	1,254	*0.500				
	L2 Room West Wing	High-Rise Residential Living	2,522	*0.500				
L3 Wall Heater #301-314	L3 BED North Wing	High-Rise Residential Living	1,224	*0.500				
	L3 BED East Wing	High-Rise Residential Living	2,665	*0.500				

Notes: 1. See LTG-1C (items marked with asterisk, see LTG-1-C by others) 2. See LTG-2C 3. See LTG-3C (by others) 4. See LTG-4C
Items above require special documentation

EXCEPTIONAL CONDITIONS COMPLIANCE CHECKLIST

The local enforcement agency should pay special attention to the items specified in this checklist. These items require special written justification and documentation, and special verification to be used with the performance approach. The local enforcement agency determines the adequacy of the justifications, and may reject a building or design that otherwise complies based on the adequacy of the special justification and documentation submitted.

Multiple Dwelling Units are served by a common water heater. Verify DHW details.

Building has 70 Dwelling Units. This has been used in the Highrise Residential DHW calcs.

The DHW System Pennant Boiler B-1/B-2 includes a Solar Savings Fraction (73.0%) for solar thermal water heating as calculated from the equations in Re

The DHW System Pennant Boiler B-1/B-2 is a non-NAECA large storage gas water heater. Verify DHW details.

The HVAC System FC-2.2 includes Demand Control Ventilation per Standards Section 121.

The HVAC System MU-1 A Premium Efficiency 3.00 BHP Supply Fan Motor has been specified.

The Roof R-30 Metal Framed Reflectance = 0.61, Emittance = 0.85 shall be rated and labeled by the Cool Roof Rating Council in accordance with Section

The exceptional features listed in this performance approach application have specifically been reviewed. Adequate written justification and documentation for their use have been provided by the applicant.

Authorized Signature or Stamp _____

PERFORMANCE CERTIFICATE OF COMPLIANCE (Part 3 of 3) PERF-1C

Project Name *6th and Oak Street Apartments* Date *11/12/2010*

ZONE INFORMATION

System Name	Zone Name	Occupancy Type	Floor Area (sqft.)	Inst. LPD (W/sf) ¹	Ctrl. Credits (W/sf) ²	Allowed LPD		Proc. Loads (W/sf)
						Area (W/sf) ³	Tailored (W/sf) ⁴	
	<i>L3 BED South Wing</i>	<i>High-Rise Residential Living</i>	<i>1,252</i>	<i>*0.500</i>				
	<i>L3 BED West Wing</i>	<i>High-Rise Residential Living</i>	<i>2,522</i>	<i>*0.500</i>				
<i>L4 Wall Heater #401-414</i>	<i>L4 BED North Wing</i>	<i>High-Rise Residential Living</i>	<i>1,223</i>	<i>*0.500</i>				
	<i>L4 BED East Wing</i>	<i>High-Rise Residential Living</i>	<i>2,662</i>	<i>*0.500</i>				
	<i>L4 BED South Wing</i>	<i>High-Rise Residential Living</i>	<i>1,255</i>	<i>*0.500</i>				
	<i>L4 BED West Wing</i>	<i>High-Rise Residential Living</i>	<i>2,522</i>	<i>*0.500</i>				
<i>L5 Wall Heater #501-514</i>	<i>L5 BED North Wing</i>	<i>High-Rise Residential Living</i>	<i>1,224</i>	<i>*0.500</i>				
	<i>L5 BED East Wing</i>	<i>High-Rise Residential Living</i>	<i>2,663</i>	<i>*0.500</i>				
	<i>L5 BED South Wing</i>	<i>High-Rise Residential Living</i>	<i>1,254</i>	<i>*0.500</i>				
	<i>L5 BED West Wing</i>	<i>High-Rise Residential Living</i>	<i>2,522</i>	<i>*0.500</i>				
<i>L6 Wall Heater #601-614</i>	<i>L6 BED North Wing</i>	<i>High-Rise Residential Living</i>	<i>1,224</i>	<i>*0.500</i>				
	<i>L6 BED East Wing</i>	<i>High-Rise Residential Living</i>	<i>2,662</i>	<i>*0.500</i>				
	<i>L6 BED South Wing</i>	<i>High-Rise Residential Living</i>	<i>1,254</i>	<i>*0.500</i>				
	<i>L6 BED West Wing</i>	<i>High-Rise Residential Living</i>	<i>2,522</i>	<i>*0.500</i>				

Notes: 1. See LTG-1C (items marked with asterisk, see LTG-1-C by others) 2. See LTG-2C 3. See LTG-3C (by others) 4. See LTG-4C
Items above require special documentation

EXCEPTIONAL CONDITIONS COMPLIANCE CHECKLIST

The local enforcement agency should pay special attention to the items specified in this checklist. These items require special written justification and documentation, and special verification to be used with the performance approach. The local enforcement agency determines the adequacy of the justifications, and may reject a building or design that otherwise complies based on the adequacy of the special justification and documentation submitted.

The exceptional features listed in this performance approach application have specifically been reviewed. Adequate written justification and documentation for their use have been provided by the applicant.

Authorized Signature or Stamp _____

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>
			Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
1	Wall	115	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
2	Wall	53	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
3	Wall	41	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
4	Slab	690	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
5	Slab	144	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
6	Wall	88	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
7	Wall	62	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
8	Slab	421	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
1	Window	4,351	(NE)	0.310	COG	0.380	COG	<input type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
2	Window	2,451	(SE)	0.310	COG	0.380	COG	<input type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
3	Window	3,862	(SW)	0.310	COG	0.380	COG	<input type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
4	Window	1,057	(NW)	0.310	COG	0.380	COG	<input type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
5	Window	25	(NE)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
6	Window	48	(SW)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
7	Window	75	(NE)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
8	Window	75	(NE)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
9	Slab	120	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
10	Wall	44	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
11	Slab	132	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
12	Wall	34	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
13	Slab	242	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
14	Slab	95	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
15	Wall	117	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
16	Wall	24	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
9	Window	1	(NE)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
10	Window	75	(NE)	0.310	COG	0.380	COG	<input checked="" type="checkbox"/>	New	<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
17	Slab	528	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
18	Slab	170	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
19	Wall	15	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
20	Slab	112	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
21	Slab	1,205	(N)	0.730	None					4.4.7-A1	New	<input type="checkbox"/>	<input type="checkbox"/>
22	Wall	32	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
23	Wall	32	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
24	Roof	1,327	(NW)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space $\geq 8000 \text{ ft}^2$ (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
25	Wall	32	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
26	Wall	32	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
27	Wall	32	(NW)	0.063	R-13	6.0	None			4.3.1-A3	New	<input type="checkbox"/>	<input type="checkbox"/>
28	Wall	32	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
29	Wall	32	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
30	Wall	32	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
31	Wall	32	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
32	Wall	32	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
33	Floor	575	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
34	Wall	321	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
35	Wall	56	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
36	Wall	35	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
37	Wall	134	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
38	Floor	710	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
39	Wall	305	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
40	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
41	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
42	Wall	80	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
43	Floor	514	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
44	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
45	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
46	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
47	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
48	Wall	60	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION				
Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room	
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces	
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)				
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)	
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>			

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
49	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
50	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
51	Floor	578	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
52	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
53	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
54	Floor	578	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
55	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
56	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION									
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵	
57	Floor	578	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>	
58	Wall	43	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
59	Wall	143	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
60	Wall	250	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
61	Wall	65	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
62	Wall	38	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
63	Wall	208	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
64	Wall	140	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>	
												<input type="checkbox"/>	<input type="checkbox"/>	
												<input type="checkbox"/>	<input type="checkbox"/>	

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
65	Wall	30	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
66	Wall	101	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
67	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
68	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
69	Wall	101	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
70	Wall	60	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
71	Floor	605	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
72	Wall	30	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
73	Wall	93	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
74	Wall	30	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
75	Floor	496	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
76	Wall	80	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
77	Wall	103	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
78	Wall	59	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
79	Floor	604	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
80	Wall	50	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
81	Wall	103	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
82	Wall	23	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
83	Floor	605	(N)	0.084	R-8	1.0	None			4.4.6-A5	New	<input type="checkbox"/>	<input type="checkbox"/>
84	Wall	321	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
85	Wall	134	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
86	Wall	13	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
87	Wall	56	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
88	Wall	305	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>
			Addition Floor Area <i>n/a</i>

GENERAL INFORMATION				
Building Type:		<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces	
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)				
Phase of Construction:		<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:		<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:		<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
89	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
90	Wall	110	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
91	Wall	80	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
92	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
93	Wall	60	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
94	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
95	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
96	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
97	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
98	Wall	60	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
99	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
100	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
101	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
102	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
103	Wall	13	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
104	Wall	65	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
105	Wall	250	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
106	Wall	137	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
107	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
108	Wall	41	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
109	Wall	209	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
110	Wall	30	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
111	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
112	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION				
Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room	
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces	
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)				
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)	
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>			

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
113	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
114	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
115	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
116	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
117	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
118	Wall	86	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
119	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
120	Wall	118	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
121	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
122	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
123	Wall	153	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
124	Wall	321	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
125	Wall	134	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
126	Wall	13	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
127	Wall	56	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
128	Wall	305	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
129	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
130	Wall	110	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
131	Wall	80	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
132	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
133	Wall	60	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
134	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
135	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
136	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
137	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
138	Wall	60	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
139	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
140	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
141	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
142	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
143	Wall	13	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
144	Wall	65	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
145	Wall	250	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
146	Wall	137	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
147	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
148	Wall	41	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
149	Wall	209	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
150	Wall	30	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
151	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
152	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
153	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
154	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
155	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
156	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
157	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
158	Wall	86	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
159	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
160	Wall	118	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
161	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
162	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
163	Wall	153	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
164	Wall	321	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
165	Wall	134	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
166	Wall	13	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
167	Wall	56	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
168	Wall	305	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
169	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
170	Wall	110	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
171	Wall	80	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
172	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
173	Wall	60	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
174	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
175	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
176	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
177	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
178	Wall	60	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
179	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
180	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
181	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
182	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
183	Wall	13	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
184	Wall	65	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
185	Wall	250	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
186	Wall	137	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
187	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
188	Wall	41	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
189	Wall	209	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
190	Wall	30	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
191	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
192	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
193	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
194	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
195	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
196	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
197	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
198	Wall	86	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
199	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
200	Wall	118	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
201	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
202	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
203	Wall	153	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
204	Wall	321	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
205	Wall	134	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
206	Wall	13	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
207	Wall	56	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
208	Roof	710	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
209	Wall	305	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
210	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
211	Wall	110	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
212	Wall	80	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
213	Roof	514	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
214	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
215	Wall	60	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
216	Roof	532	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
217	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
218	Wall	106	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
219	Roof	532	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
220	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
221	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
222	Wall	60	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
223	Roof	532	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
224	Wall	39	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>
			Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
225	Wall	108	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
226	Roof	532	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
227	Wall	38	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
228	Wall	105	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
229	Roof	532	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
230	Wall	13	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
231	Wall	65	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
232	Wall	250	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
 2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
233	Wall	137	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
234	Roof	710	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
235	Wall	39	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
236	Wall	41	(NE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
237	Wall	209	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
238	Wall	30	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
239	Roof	544	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
240	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
	<input type="checkbox"/> Unconditioned Spaces		
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
241	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
242	Roof	517	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
243	Wall	19	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
244	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
245	Wall	116	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
246	Roof	485	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
247	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
248	Wall	40	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R-Value	Exterior Furring ³	Interior R-Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
249	Wall	86	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
250	Roof	431	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
251	Wall	40	(NW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
252	Wall	118	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
253	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
254	Roof	521	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
255	Wall	19	(SE)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
256	Wall	153	(SW)	0.127	R-19	4.5	Metal			4.3.3-A7	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

- See Instructions in the Nonresidential Compliance Manual, page 3-96.
- If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 3)

ENV-1C

Project Name <i>6th and Oak Street Apartments</i>			Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>		Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces	<input type="checkbox"/> Unconditioned Spaces
<input type="checkbox"/> Skylight Area for Large Enclosed Space ≥ 8000 ft ² (If checked include the ENV-4C with submittal)			
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input checked="" type="checkbox"/> Overall Envelope	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

FIELD INSPECTION ENERGY CHECKLIST

OPAQUE SURFACE DETAILS					INSULATION								
Tag/ID ¹	Assembly Type ²	Area (ft ²)	Orientation N, E, S, W	U-Factor	Cavity R-Value	Exterior R- Value	Exterior Furring ³	Interior R- Value	Interior Furring ³	Joint Appendix 4	Condition Status ⁴	Pass	Fail ⁵
257	Roof	569	(N)	0.076	R-30					4.2.5-A14	New	<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>
												<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail, then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. A fail does not meet compliance.

FENESTRATION SURFACE DETAILS

Tag/ID ¹	Fenestration Type ²	Area (ft ²)	Orientation N, E, S, W	Max U-Factor	U-Factor Source ³	Max (R)SHGC	SHGC Source ³	Overhang	Conditions Status ⁴	Pass	Fail ⁶
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

1. See Instructions in the Nonresidential Compliance Manual, page 3-96.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 2 of 3)

ENV-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

ROOFING PRODUCT (COOL ROOFS)

(Note if the roofing product is not CRRC certified, this compliance approach cannot be used). Go to Overall Envelope Approach or Performance Approach.

CHECK APPLICABLE BOX BELOW IF EXEMPT FROM THE ROOFING PRODUCT "COOL ROOF" REQUIREMENTS:	Pass	Fail ¹	N/A
<input type="checkbox"/> Roofing compliance <u>not</u> required in Climate Zones 1 and 16 with a Low-Sloped. 2:12 pitch or less.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Roofing compliance <u>not</u> required in Climate Zone 1 with a Steep-Sloped with less than 5 lb/ft ² . Greater than 2:12 pitch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Low-sloped Wood framed roofs in Climate Zones 3 and 5 are exempted, solar reflectance and thermal emittance or SRI that have a U-factor of 0.039 or lower. See Opaque Surface Details roof assembly, Column H of ENV-2C.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Low-sloped Metal building roofs in Climate Zone 3 and 5 are exempted, solar reflectance and thermal emittance or SRI that have a U-factor of 0.048 or lower. See Opaque Surface Details roof assembly below, Column H of ENV-2C.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> The roof area covered by building integrated photovoltaic panels and building integrated solar thermal panels are exempted. Solar reflectance and thermal emittance or SRI, see spreadsheet calculator at www.energy.ca.gov/title24/	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Roof constructions that have thermal mass over the roof membrane with a weight of at least 25 lb/ft ² are exempt from the Cool Roof criteria below.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> High-rise residential buildings and hotels and motels with low-sloped roofs in Climate Zones 1 through 9, 12 and 16 are exempted from the low-sloped roofing criteria.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. If Fail then describe on this page of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CRRC Product ID Number ¹	Roof Slope ≤ 2:12 > 2:12		Product Weight < 5lb/ft ² ≥ 5lb/ft ²		Product Type ²	Aged Solar Reflectance ³		Thermal Emittance	SRI ⁵	Pass	Fail ⁶
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>				
R-30 Metal Framed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	0.61	0.85		<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>

- The CRRC Product ID Number can be obtained from the Cool Roof Rating Council's Rated Product Directory at www.coolroofs.org/products/search.php
- Indicate the type of product is being used for the roof top, i.e. single-ply roof, asphalt roof, metal roof, etc.
- If the Aged Reflectance is not available in the Cool Roof Rating Council's Rated Product Directory then use the Initial Reflectance value from the same directory and use the equation $(0.2+0.7(\rho_{\text{initial}} - 0.2))$ to obtain a calculated aged value. Where ρ is the Initial Solar Reflectance from the Cool Roof Rating Council's Rated Product Directory.
- Check box if the Aged Reflectance is a calculated value using the equation above.
- The SRI value needs to be calculated from a spreadsheet calculator at <http://www.energy.ca.gov/title24/>
- If Fail then describe on this page of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

To apply **Liquid Field Applied Coatings**, the coating must be applied across the entire roof surface and meet the dry mil thickness or coverage recommended by the coatings manufacturer and meet minimum performance requirements listed in §118(i)4. Select the applicable coating:

Aluminum-Pigmented Asphalt Roof Coating Cement-Based Roof Coating Other _____

Discrepancies:

CERTIFICATE OF COMPLIANCE AND FIELD INSPECTION ENERGY CHECKLIST

(Part 3 of 3)

ENV-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

Required Acceptance Tests

Designer:

This form is to be used by the designer and attached to the plans. Listed below is the acceptance test for Envelope Fenestrations system. The designer is required to check the acceptance tests and list all the fenestration products that require an acceptance test. If all the site-built fenestration of a certain type requires a test, list the different fenestration products and the number of systems. The NA7 Section in the Appendix of the Nonresidential Reference Appendices Manual describes the test. Since this form will be part of the plans, completion of this section will allow the responsible party to budget for the scope of work appropriately.

Enforcement Agency:

Systems Acceptance. Before Occupancy Permit is granted for a newly constructed building or space or whenever new fenestration is installed in the building or space shall be certified as meeting the Acceptance Requirements. The ENV-2A form is not considered a complete form and is not to be accepted by the enforcement agency unless the boxes are checked and/or filled and signed. In addition, a Certificate of Acceptance forms shall be submitted to the enforcement agency that certifies plans, specifications, installation certificates, and operating and maintenance information meet the requirements of §10-103(b) of Title 24 Part 6. The field inspector must receive the properly filled out and signed forms before the building can receive final occupancy. A copy of the ENV-2A for each different fenestration product line must be provided to the owner of the building for their records.

Test Description		ENV-2A	Test Performed By:
Fenestration Products Name or ID Requiring Testing or Verification	Area of like Products	Building Envelope Acceptance Test	
PPG SOLARBAN 60 (2) Clear	12,020	<input checked="" type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
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		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	
		<input type="checkbox"/>	

CERTIFICATE OF COMPLIANCE

(Part 1 of 3)

LTG-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

INDOOR LIGHTING SCHEDULE and FIELD INSPECTION ENERGY CHECKLIST

Installation Certificate, LTG-1- INST (Retain a copy and verify form is completed and signed.)

Field Inspector

Certificate of Acceptance, LTG-2A and LTG-3A (Retain a copy and verify form is completed and signed.)

Field Inspector

A separate Lighting Schedule Must Be Filled Out for Conditioned and Unconditioned Spaces Installed Lighting Power listed on this Lighting Schedule is only for:

CONDITIONED SPACE **UNCONDITIONED SPACE**

The actual indoor lighting power listed below includes all installed permanent and portable lighting systems in accordance with §146(a).

Only for offices: Up to the first 0.2 watts per square foot of portable lighting shall not be required to be included in the calculation of actual indoor lighting power density in accordance with the Exception to §146(a). All portable lighting in excess of 0.2 watts per square foot is totaled below.

Luminaire (Type, Lamps, Ballasts)		Installed Watts							
A	B	C	D	E		F	G	H	
None or Item Tag	Complete Luminaire Description ¹ (i.e, 3 lamp fluorescent troffer, F32T8, one dimmable electronic ballasts)		Watts per Luminaire ¹	How wattage Was determined		Number of Luminaires	Installed Watts (D X F)	Field Inspector ²	
				CEC Default From NA8	According To §130 (d or e)			Pass	Fail
	A24		62.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	124	<input type="checkbox"/>	<input type="checkbox"/>
A11	A11		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	15	480	<input type="checkbox"/>	<input type="checkbox"/>
A12	A12		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14	448	<input type="checkbox"/>	<input type="checkbox"/>
A12A	A12		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20	640	<input type="checkbox"/>	<input type="checkbox"/>
A13	A13		93.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	93	<input type="checkbox"/>	<input type="checkbox"/>
A14	A14		93.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9	837	<input type="checkbox"/>	<input type="checkbox"/>
A15	A15		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	64	<input type="checkbox"/>	<input type="checkbox"/>
A16	A16		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	30	960	<input type="checkbox"/>	<input type="checkbox"/>
A17	A17		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25	800	<input type="checkbox"/>	<input type="checkbox"/>
A24	A24		62.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	20	1,240	<input type="checkbox"/>	<input type="checkbox"/>
A25	A25		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	21	672	<input type="checkbox"/>	<input type="checkbox"/>
A26	A26		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	32	<input type="checkbox"/>	<input type="checkbox"/>
A27	A27		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	32	<input type="checkbox"/>	<input type="checkbox"/>
A29	A29		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	32	<input type="checkbox"/>	<input type="checkbox"/>
A31	A31		32.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	64	<input type="checkbox"/>	<input type="checkbox"/>
A6	A6		16.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	70	1,120	<input type="checkbox"/>	<input type="checkbox"/>
A9	A9		24.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	48	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
Installed Watts Page Total:							7,686		
Building total number of pages:				Installed Watts Building Total (Sum of all pages)					
				Enter into LTG-1C Page 4 of 4			7,686		

1. Wattage shall be determined according to Section 130 (d and e). Wattage shall be rating of light fixture, not rating of bulb.
2. If Fail then describe on Page 2 of the Inspection Checklist Form and take appropriate action to correct. Verify building plans if necessary.

CERTIFICATE OF COMPLIANCE

(Part 2 of 3)

LTG-1C

Project Name
6th and Oak Street Apartments

Date
11/12/2010

INDOOR LIGHTING SCHEDULE and FIELD INSPECTION ENERGY CHECKLIST

Fill in controls for all spaces: a) area controls, b) multi-level controls, c) manual daylighting controls for daylight areas > 250 ft², automatic daylighting controls for daylight areas > 2,500 ft², d) shut-off controls, e) display lighting controls, f) tailored lighting controls – general lighting controlled separately from display, ornamental and display case lighting and g) demand responsive automatic controls for retail stores > 50,000 ft², in accordance with Section 131.

MANDATORY LIGHTING CONTROLS – FIELD INSPECTION ENERGY CHECKLIST				Field Inspector	
Type/ Description	Number of Units	Location in Building	Special Features	Pass	Fail
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SPECIAL FEATURES INSPECTION CHECKLIST (See Page 2 of 4 of LTG-1C)

The local enforcement agency should pay special attention to the items specified in this checklist. These items require special written justification and documentation, and special verification. The local enforcement agency determines the adequacy of the justification, and may reject a building or design that otherwise complies based on the adequacy of the special justification and documentation submitted.

Field Inspector's Notes or Discrepancies:

CERTIFICATE OF COMPLIANCE

(Part 3 of 3)

LTG-1C

Project Name <i>6th and Oak Street Apartments</i>	Date <i>11/12/2010</i>
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CONDITIONED AND UNCONDITIONED SPACE LIGHTING MUST NOT BE COMBINED FOR COMPLIANCE

Indoor Lighting Power for Conditioned Spaces		Indoor Lighting Power for Unconditioned Spaces	
	Watts		Watts
Installed Lighting (from Conditioned LTG-1C, Page 2)	7,686	Installed Lighting (from Unconditioned LTG-1C, Page 2)	0
Lighting Control Credit Conditioned Spaces (from LTG-2C)	- 503	Lighting Control Credit Unconditioned Spaces (from LTG-2C)	- 0
Adjusted Installed Lighting Power =	7,183	Adjusted Installed Lighting Power =	0
Complies if Installed ≤ Allowed ↑↓		Complies if Installed ≤ Allowed ↑↓	
Allowed Lighting Power Conditioned Spaces (from LTG-3C or PERF-1)	7,183	Allowed Lighting Power Unconditioned Spaces (from LTG-3C)	0

Required Acceptance Tests

Designer:

This form is to be used by the designer and attached to the plans. Listed below is the acceptance test for the Lighting system, **LTG-2A and LTG-3A**. The designer is required to check the acceptance tests and list all control devices serving the building or space shall be certified as meeting the Acceptance Requirements for Code Compliance. If all the lighting system or control of a certain type requires a test, list the different lighting and the number of systems. The NA7 Section in the Appendix of the Nonresidential Reference Appendices Manual describes the test. Since this form will be part of the plans, completion of this section will allow the responsible party to budget for the scope of work appropriately. **Forms can be grouped by type of Luminaire controlled.**

Enforcement Agency:

Systems Acceptance. Before Occupancy Permit is granted for a newly constructed building or space or when ever new lighting system with controls is installed in the building or space shall be certified as meeting the Acceptance Requirements. The **LTG-2A and LTG-3A** forms are not considered complete forms and are not to be accepted by the enforcement agency unless the boxes are checked and/or filled and signed. In addition, a Certificate of Acceptance forms shall be submitted to the enforcement agency that certifies plans, specifications, installation certificates, and operating and maintenance information meet the requirements of §10-103(b) of Title 24 Part 6. The field inspector must receive the properly filled out and signed forms before the building can receive final occupancy. A copy of the **LTG-2A and LTG-3A** for each different lighting luminaire control(s) must be provided to the owner of the building for their records.

Controls for Credits				LTG-2A and LTG-3A
Equipment Requiring Testing	Description	Number of Luminaire controls	Location	Controls and Sensors and Automatic Daylighting Controls Acceptance
<i>Occ Sensor - Multi-Level</i>	<i>A12</i>	<i>14</i>	<i>L1 Community Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A13</i>	<i>1</i>	<i>L1 Community Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A17</i>	<i>3</i>	<i>L1 Community Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A27</i>	<i>1</i>	<i>L1 Community Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A26</i>	<i>1</i>	<i>L1 Community Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A14</i>	<i>2</i>	<i>L1 Service Office</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A14</i>	<i>2</i>	<i>L1 Work Room</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A14</i>	<i>1</i>	<i>L1 Conference</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A14</i>	<i>2</i>	<i>L1 Manager's Office</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A14</i>	<i>2</i>	<i>L1 Laundry</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Multi-Level</i>	<i>A9</i>	<i>2</i>	<i>L1 Bathroom</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Storage</i>	<i>A24</i>	<i>4</i>	<i>L6 Corridor</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Storage</i>	<i>A24</i>	<i>4</i>	<i>L5 Corridor</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Storage</i>	<i>A24</i>	<i>4</i>	<i>L4 Corridor</i>	<input checked="" type="checkbox"/>
<i>Occ Sensor - Storage</i>	<i>A24</i>	<i>4</i>	<i>L3 Corridor</i>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

CERTIFICATE OF COMPLIANCE (Part 3 of 3) **LTG-1C**

Project Name *6th and Oak Street Apartments* Date *11/12/2010*

CONDITIONED AND UNCONDITIONED SPACE LIGHTING MUST NOT BE COMBINED FOR COMPLIANCE

Indoor Lighting Power for Conditioned Spaces		Indoor Lighting Power for Unconditioned Spaces	
	Watts		Watts
Installed Lighting (from Conditioned LTG-1C, Page 2)	7,686	Installed Lighting (from Unconditioned LTG-1C, Page 2)	0
Lighting Control Credit Conditioned Spaces (from LTG-2C)	- 503	Lighting Control Credit Unconditioned Spaces (from LTG-2C)	- 0
Adjusted Installed Lighting Power =	7,183	Adjusted Installed Lighting Power =	0
Complies if Installed ≤ Allowed		Complies if Installed ≤ Allowed	
Allowed Lighting Power Conditioned Spaces (from LTG-3C or PERF-1)	7,183	Allowed Lighting Power Unconditioned Spaces (from LTG-3C)	0

Required Acceptance Tests

Designer:

This form is to be used by the designer and attached to the plans. Listed below is the acceptance test for the Lighting system, **LTG-2A and LTG-3A**. The designer is required to check the acceptance tests and list all control devices serving the building or space shall be certified as meeting the Acceptance Requirements for Code Compliance. If all the lighting system or control of a certain type requires a test, list the different lighting and the number of systems. The NA7 Section in the Appendix of the Nonresidential Reference Appendices Manual describes the test. Since this form will be part of the plans, completion of this section will allow the responsible party to budget for the scope of work appropriately. **Forms can be grouped by type of Luminaire controlled.**

Enforcement Agency:

Systems Acceptance. Before Occupancy Permit is granted for a newly constructed building or space or when ever new lighting system with controls is installed in the building or space shall be certified as meeting the Acceptance Requirements. The **LTG-2A and LTG-3A** forms are not considered complete forms and are not to be accepted by the enforcement agency unless the boxes are checked and/or filled and signed. In addition, a Certificate of Acceptance forms shall be submitted to the enforcement agency that certifies plans, specifications, installation certificates, and operating and maintenance information meet the requirements of §10-103(b) of Title 24 Part 6. The field inspector must receive the properly filled out and signed forms before the building can receive final occupancy. A copy of the **LTG-2A and LTG-3A** for each different lighting luminaire control(s) must be provided to the owner of the building for their records.

Controls for Credits				LTG-2A and LTG-3A
Equipment Requiring Testing	Description	Number of Luminaire controls	Location	Controls and Sensors and Automatic Daylighting Controls Acceptance
Occ Sensor - Storage	A24	4	L2 Corridor	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>DHW Heater</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Gas Fired DHW Boiler</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>2</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>500,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>96 %</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>FC-1.1, 1.2</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>2</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>14,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>12,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>13.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>FC-1.3</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>11,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>9,500 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>13.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>FC-2.1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>20,500 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>17,800 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>13.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>FC-2.2</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>11,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>9,500 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>13.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>FC-2.3</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>11,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>9,500 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>13.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>DS-1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>8.80 HSPF</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>24,200 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>18.0 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L1 HP 1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>36,800 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>8.80 HSPF</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>32,300 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>14.5 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>Attic, Ceiling Ins, vented / 8.0</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L1 HP 2</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>37,300 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>8.80 HSPF</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>33,600 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>14.5 SEER / 10.0 EER</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>Attic, Ceiling Ins, vented / 8.0</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>MU-1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>1</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>200,000 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>78% AFUE</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>Attic, Ceiling Ins, vented / 8.0</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>100% Outside Air</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

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2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L2 Wall Heater #201-214</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>28</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>3,077 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L3 Wall Heater #301-314</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>28</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>3,077 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L4 Wall Heater #401-414</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>28</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>3,077 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L5 Wall Heater #501-514</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>28</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>3,077 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST

(Part 1 of 4)

MECH-1C

Project Name <i>6th and Oak Street Apartments</i>		Date <i>11/12/2010</i>	
Project Address <i>609 Oak Street Oakland</i>	Climate Zone <i>3</i>	Total Cond. Floor Area <i>46,320</i>	Addition Floor Area <i>n/a</i>

GENERAL INFORMATION

Building Type:	<input checked="" type="checkbox"/> Nonresidential	<input checked="" type="checkbox"/> High-Rise Residential	<input type="checkbox"/> Hotel/Motel Guest Room
	<input type="checkbox"/> Schools (Public School)	<input type="checkbox"/> Relocatable Public School Bldg.	<input checked="" type="checkbox"/> Conditioned Spaces
			<input type="checkbox"/> Unconditioned Spaces (affidavit)
Phase of Construction:	<input checked="" type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
Approach of Compliance:	<input type="checkbox"/> Component	<input type="checkbox"/> Overall Envelope TDV Energy	<input type="checkbox"/> Unconditioned (file affidavit)
Front Orientation: N, E, S, W or in Degrees:	<i>150 deg</i>		

HVAC SYSTEM DETAILS

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)	<i>L6 Wall Heater #601-614</i>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :	<i>Split DX</i>	<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems	<i>28</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹	<i>3,077 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹	<i>0 Btu/hr</i>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value	<i>n/a</i>	<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS	<i>No</i>	<input type="checkbox"/>	<input type="checkbox"/>
Economizer	<i>No Economizer</i>	<input type="checkbox"/>	<input type="checkbox"/>
Thermostat	<i>Setback Required</i>	<input type="checkbox"/>	<input type="checkbox"/>
Fan Control	<i>Constant Volume</i>	<input type="checkbox"/>	<input type="checkbox"/>

FIELD INSPECTION ENERGY CHECKLIST

Equipment ²	Inspection Criteria	Meets Criteria or Requirements	
		Pass	Fail – Describe Reason ²
Item or System Tags (i.e. AC-1, RTU-1, HP-1)		<input type="checkbox"/>	<input type="checkbox"/>
Equipment Type ³ :		<input type="checkbox"/>	<input type="checkbox"/>
Number of Systems		<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Heating Capacity ¹		<input type="checkbox"/>	<input type="checkbox"/>
Minimum Heating Efficiency ¹		<input type="checkbox"/>	<input type="checkbox"/>
Max Allowed Cooling Capacity ¹		<input type="checkbox"/>	<input type="checkbox"/>
Cooling Efficiency ¹		<input type="checkbox"/>	<input type="checkbox"/>
Duct Location/ R-Value		<input type="checkbox"/>	<input type="checkbox"/>
When duct testing is required, submit MECH-4A & MECH-4-HERS		<input type="checkbox"/>	<input type="checkbox"/>
Economizer		<input type="checkbox"/>	<input type="checkbox"/>
Thermostat		<input type="checkbox"/>	<input type="checkbox"/>
Fan Control		<input type="checkbox"/>	<input type="checkbox"/>

1. If the Actual installed equipment performance efficiency and capacity is less than the Proposed (from the energy compliance submittal or from the building plans) the responsible party shall resubmit energy compliance to include the new changes.
 2. For additional detailed discrepancy use Page 2 of the Inspection Checklist Form. Compliance fails if a Fail box is checked.
 3. Indicate Equipment Type: Gas (Pkg or, Split), VAV, HP (Pkg or split), Hydronic, PTAC, or other.

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST (Part 3 of 4) MECH-1C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Required Acceptance Tests

Designer:

This form is to be used by the designer and attached to the plans. Listed below are all the acceptance tests for mechanical systems. The designer is required to check the applicable boxes by all acceptance tests that apply and listed all equipment that requires an acceptance test. If all equipment of a certain type requires a test, list the equipment description and the number of systems. The NA number designates the Section in the Appendix of the Nonresidential Reference Appendices Manual that describes the test. Since this form will be part of the plans, completion of this section will allow the responsible party to budget for the scope of work appropriately.

Building Departments:

Systems Acceptance: Before occupancy permit is granted for a newly constructed building or space, or a new space-conditioning system serving a building or space is operated for normal use, all control devices serving the building or space shall be certified as meeting the Acceptance Requirements for Code Compliance.
Systems Acceptance: Before occupancy permit is granted. All newly installed HVAC equipment must be tested using the Acceptance Requirements.

The MECH-1C form is not considered a completed form and is not to be accepted by the building department unless the correct boxes are checked. The equipment requiring testing, person performing the test (Example: HVAC installer, TAB contractor, controls contractor, PE in charge of project) and what Acceptance test must be conducted. The following checked-off forms are required for **ALL** newly installed equipment. In addition a Certificate of Acceptance forms shall be submitted to the building department that certifies plans, specifications, installation, certificates, and operating and maintenance information meet the requirements of §10-103(b) and Title-24 Part 6. The building inspector must receive the properly filled out and signed forms before the building can receive final occupancy.

TEST DESCRIPTION	MECH-2A	MECH-3A	MECH-4A	MECH-5A	MECH-6A	MECH-7A	MECH-8A	MECH-9A	MECH-10A	MECH-11A	
Equipment Requiring Testing or Verification	Qty.	Outdoor Ventilation For VAV & CAV	Constant Volume & Single-Zone Unitary	Air Distribution Ducts	Economizer Controls	Demand Control Ventilation DCV	Supply Fan VAV	Valve Leakage Test	Supply Water Temp. Reset	Hydronic System Variable Flow Control	Automatic Demand Shed Control
FC-1.1, 1.2	2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FC-1.3	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FC-2.1	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FC-2.2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FC-2.3	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DS-1	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HP #1	1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HP #2	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MU-1	1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
WH-1/WH-2	140	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CERTIFICATE OF COMPLIANCE and FIELD INSPECTION ENERGY CHECKLIST (Part 4 of 4) MECH-1C

Project Name: 6th and Oak Street Apartments Date: 11/12/2010

TEST DESCRIPTION		Qty.	MECH-12A Fault Detection & Diagnostics for DX Units	MECH-13A Automatic Fault Detection & Diagnostics for Air & Zone	MECH-14A Distributed Energy Storage DX AC Systems	MECH-15A Thermal Energy Storage (TES) Systems	Test Performed By:
Equipment Requiring Testing							
FC-1.1, 1.2		2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FC-1.3		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FC-2.1		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FC-2.2		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FC- 2.3		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DS-1		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HP #1		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
HP #2		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
MU-1		1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WH-1/WH-2		140	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

AIR SYSTEM REQUIREMENTS

(Part 1 of 2)

MECH-2C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Item or System Tags (i.e. AC-1, RTU-1, HP-1)	Indicate Air Systems Type (Central, Single Zone, Package, VAV, or etc...)			
		FC-1.1, 1.2	FC-1.3	FC-2.1
Number of Systems		2	1	1

MANDATORY MEASURES	Indicate Page Reference on Plans or Schedule and indicate the applicable exception(s)			
	T-24 Sections			
Heating Equipment Efficiency	112(a)	n/a	n/a	n/a
Cooling Equipment Efficiency	112(a)	13.0 SEER / 10.0 EER	13.0 SEER / 10.0 EER	13.0 SEER / 10.0 EER
HVAC Heat Pump Thermostat	112(b), 112(c)	n/a	n/a	n/a
Furnace Controls/Thermostat	112(c), 115(a)	n/a	n/a	n/a
Natural Ventilation	121(b)	No	No	No
Mechanical Ventilation	121(b)	345 cfm	22 cfm	81 cfm
VAV Minimum Position Control	121(c)	No	No	No
Demand Control Ventilation	121(c)	No	No	No
Time Control	122(e)	Programmable Switch	Programmable Switch	Programmable Switch
Setback and Setup Control	122(e)	Setback Required	Setback Required	Setback Required
Outdoor Damper Control	122(f)	Auto	Auto	Auto
Isolation Zones	122(g)	n/a	n/a	n/a
Pipe Insulation	123			
Duct Location/ R-value	124	n/a	n/a	n/a

PRESCRIPTIVE MEASURES

Calculated Design Heating Load	144(a & b)	n/a	n/a	n/a
Proposed Heating Capacity	144(a & b)	28,000 Btu/hr	11,000 Btu/hr	20,500 Btu/hr
Calculated Design Cooling Load	144(a & b)	n/a	n/a	n/a
Proposed Cooling Capacity	144(a & b)	23,682 Btu/hr	8,631 Btu/hr	16,104 Btu/hr
Fan Control	144(c)	Constant Volume	Constant Volume	Constant Volume
DP Sensor Location	144(c)			
Supply Pressure Reset (DDC only)	144(c)	Yes	Yes	Yes
Simultaneous Heat/Cool	144(d)	No	No	No
Economizer	144(e)	No Economizer	No Economizer	No Economizer
Heat Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Cool Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Electric Resistance Heating ¹	144(g)			
Air Cooled Chiller Limitation	144(i)			
Duct Leakage Sealing. If Yes, a MECH-4-A must be submitted	144(k)	No	No	No

1. Total installed capacity (MBtu/hr) of all electric heat on this project exclusive of electric auxiliary heat for heat pumps. If electric heat is used explain which exception(s) to §144(g) apply.

AIR SYSTEM REQUIREMENTS

(Part 1 of 2)

MECH-2C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Item or System Tags (i.e. AC-1, RTU-1, HP-1)	Indicate Air Systems Type (Central, Single Zone, Package, VAV, or etc...)			
		FC-2.2	FC-2.3	DS-1
Number of Systems		1	1	1

MANDATORY MEASURES	Indicate Page Reference on Plans or Schedule and indicate the applicable exception(s)			
	T-24 Sections			
Heating Equipment Efficiency	112(a)	n/a	n/a	8.80 HSPF
Cooling Equipment Efficiency	112(a)	13.0 SEER / 10.0 EER	13.0 SEER / 10.0 EER	18.0 SEER / 10.0 EER
HVAC Heat Pump Thermostat	112(b), 112(c)	n/a	n/a	Yes
Furnace Controls/Thermostat	112(c), 115(a)	n/a	n/a	n/a
Natural Ventilation	121(b)	No	No	No
Mechanical Ventilation	121(b)	66 cfm	36 cfm	14 cfm
VAV Minimum Position Control	121(c)	No	No	No
Demand Control Ventilation	121(c)	Yes	No	No
Time Control	122(e)	Programmable Switch	Programmable Switch	Programmable Switch
Setback and Setup Control	122(e)	Setback Required	Setback Required	Setback Required
Outdoor Damper Control	122(f)	Auto	Auto	Auto
Isolation Zones	122(g)	n/a	n/a	n/a
Pipe Insulation	123			
Duct Location/ R-value	124	n/a	n/a	n/a

PRESCRIPTIVE MEASURES

Calculated Design Heating Load	144(a & b)	n/a	n/a	n/a
Proposed Heating Capacity	144(a & b)	11,000 Btu/hr	11,000 Btu/hr	0 Btu/hr
Calculated Design Cooling Load	144(a & b)	n/a	n/a	n/a
Proposed Cooling Capacity	144(a & b)	9,052 Btu/hr	8,850 Btu/hr	20,820 Btu/hr
Fan Control	144(c)	Constant Volume	Constant Volume	Constant Volume
DP Sensor Location	144(c)			
Supply Pressure Reset (DDC only)	144(c)	Yes	Yes	Yes
Simultaneous Heat/Cool	144(d)	No	No	No
Economizer	144(e)	No Economizer	No Economizer	No Economizer
Heat Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Cool Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Electric Resistance Heating ¹	144(g)			
Air Cooled Chiller Limitation	144(i)			
Duct Leakage Sealing. If Yes, a MECH-4-A must be submitted	144(k)	No	No	No

1. Total installed capacity (MBtu/hr) of all electric heat on this project exclusive of electric auxiliary heat for heat pumps. If electric heat is used explain which exception(s) to §144(g) apply.

AIR SYSTEM REQUIREMENTS

(Part 1 of 2)

MECH-2C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Item or System Tags (i.e. AC-1, RTU-1, HP-1)	Indicate Air Systems Type (Central, Single Zone, Package, VAV, or etc...)			
		L1 HP 1	L1 HP 2	MU-1
Number of Systems		1	1	1

MANDATORY MEASURES	Indicate Page Reference on Plans or Schedule and indicate the applicable exception(s)			
	T-24 Sections			
Heating Equipment Efficiency	112(a)	8.80 HSPF	8.80 HSPF	78% AFUE
Cooling Equipment Efficiency	112(a)	14.5 SEER / 10.0 EER	14.5 SEER / 10.0 EER	n/a
HVAC Heat Pump Thermostat	112(b), 112(c)	Yes	Yes	n/a
Furnace Controls/Thermostat	112(c), 115(a)	n/a	n/a	n/a
Natural Ventilation	121(b)	Yes	No	No
Mechanical Ventilation	121(b)	79 cfm	42 cfm	5,125 cfm
VAV Minimum Position Control	121(c)	No	No	No
Demand Control Ventilation	121(c)	No	No	No
Time Control	122(e)	Programmable Switch	Programmable Switch	Programmable Switch
Setback and Setup Control	122(e)	Setback Required	Setback Required	Setback Required
Outdoor Damper Control	122(f)	Auto	Auto	Auto
Isolation Zones	122(g)	n/a	n/a	n/a
Pipe Insulation	123			
Duct Location/ R-value	124	Attic, Ceiling Ins, vented / 8.0	Attic, Ceiling Ins, vented / 8.0	Attic, Ceiling Ins, vented / 8.0

PRESCRIPTIVE MEASURES

Calculated Design Heating Load	144(a & b)	n/a	n/a	n/a
Proposed Heating Capacity	144(a & b)	26,838 Btu/hr	27,203 Btu/hr	200,000 Btu/hr
Calculated Design Cooling Load	144(a & b)	n/a	n/a	n/a
Proposed Cooling Capacity	144(a & b)	30,792 Btu/hr	31,006 Btu/hr	0 Btu/hr
Fan Control	144(c)	Constant Volume	Constant Volume	Constant Volume
DP Sensor Location	144(c)			
Supply Pressure Reset (DDC only)	144(c)	Yes	Yes	Yes
Simultaneous Heat/Cool	144(d)	No	No	No
Economizer	144(e)	No Economizer	No Economizer	100% Outside Air
Heat Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Cool Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Electric Resistance Heating ¹	144(g)			
Air Cooled Chiller Limitation	144(i)			
Duct Leakage Sealing. If Yes, a MECH-4-A must be submitted	144(k)	No	No	No

1. Total installed capacity (MBtu/hr) of all electric heat on this project exclusive of electric auxiliary heat for heat pumps. If electric heat is used explain which exception(s) to §144(g) apply.

AIR SYSTEM REQUIREMENTS

(Part 1 of 2)

MECH-2C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Item or System Tags (i.e. AC-1, RTU-1, HP-1)	Indicate Air Systems Type (Central, Single Zone, Package, VAV, or etc...)			
		L2 Wall Heater #201-214	L3 Wall Heater #301-314	L4 Wall Heater #401-414
Number of Systems		28	28	28

MANDATORY MEASURES	Indicate Page Reference on Plans or Schedule and indicate the applicable exception(s)			
	T-24 Sections			
Heating Equipment Efficiency	112(a)	n/a	n/a	n/a
Cooling Equipment Efficiency	112(a)	n/a	n/a	n/a
HVAC Heat Pump Thermostat	112(b), 112(c)	n/a	n/a	n/a
Furnace Controls/Thermostat	112(c), 115(a)	n/a	n/a	n/a
Natural Ventilation	121(b)	Yes	Yes	Yes
Mechanical Ventilation	121(b)	1,149 cfm	1,149 cfm	1,149 cfm
VAV Minimum Position Control	121(c)	No	No	No
Demand Control Ventilation	121(c)	No	No	No
Time Control	122(e)	Programmable Switch	Programmable Switch	Programmable Switch
Setback and Setup Control	122(e)	Setback Required	Setback Required	Setback Required
Outdoor Damper Control	122(f)	Auto	Auto	Auto
Isolation Zones	122(g)	n/a	n/a	n/a
Pipe Insulation	123			
Duct Location/ R-value	124	n/a	n/a	n/a

PRESCRIPTIVE MEASURES

Calculated Design Heating Load	144(a & b)	n/a	n/a	n/a
Proposed Heating Capacity	144(a & b)	86,156 Btu/hr	86,156 Btu/hr	86,156 Btu/hr
Calculated Design Cooling Load	144(a & b)	n/a	n/a	n/a
Proposed Cooling Capacity	144(a & b)	0 Btu/hr	0 Btu/hr	0 Btu/hr
Fan Control	144(c)	Constant Volume	Constant Volume	Constant Volume
DP Sensor Location	144(c)			
Supply Pressure Reset (DDC only)	144(c)	Yes	Yes	Yes
Simultaneous Heat/Cool	144(d)	No	No	No
Economizer	144(e)	No Economizer	No Economizer	No Economizer
Heat Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Cool Air Supply Reset	144(f)	Constant Temp	Constant Temp	Constant Temp
Electric Resistance Heating ¹	144(g)			
Air Cooled Chiller Limitation	144(i)			
Duct Leakage Sealing. If Yes, a MECH-4-A must be submitted	144(k)	No	No	No

1. Total installed capacity (MBtu/hr) of all electric heat on this project exclusive of electric auxiliary heat for heat pumps. If electric heat is used explain which exception(s) to §144(g) apply.

AIR SYSTEM REQUIREMENTS

(Part 1 of 2)

MECH-2C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Item or System Tags (i.e. AC-1, RTU-1, HP-1)	Indicate Air Systems Type (Central, Single Zone, Package, VAV, or etc...)		
		L5 Wall Heater #501-514	L6 Wall Heater #601-614
Number of Systems		28	28

MANDATORY MEASURES	Indicate Page Reference on Plans or Schedule and indicate the applicable exception(s)			
	T-24 Sections			
Heating Equipment Efficiency	112(a)	n/a	n/a	
Cooling Equipment Efficiency	112(a)	n/a	n/a	
HVAC Heat Pump Thermostat	112(b), 112(c)	n/a	n/a	
Furnace Controls/Thermostat	112(c), 115(a)	n/a	n/a	
Natural Ventilation	121(b)	Yes	Yes	
Mechanical Ventilation	121(b)	1,149 cfm	1,149 cfm	
VAV Minimum Position Control	121(c)	No	No	
Demand Control Ventilation	121(c)	No	No	
Time Control	122(e)	Programmable Switch	Programmable Switch	
Setback and Setup Control	122(e)	Setback Required	Setback Required	
Outdoor Damper Control	122(f)	Auto	Auto	
Isolation Zones	122(g)	n/a	n/a	
Pipe Insulation	123			
Duct Location/ R-value	124	n/a	n/a	

PRESCRIPTIVE MEASURES

Calculated Design Heating Load	144(a & b)	n/a	n/a	
Proposed Heating Capacity	144(a & b)	86,156 Btu/hr	86,156 Btu/hr	
Calculated Design Cooling Load	144(a & b)	n/a	n/a	
Proposed Cooling Capacity	144(a & b)	0 Btu/hr	0 Btu/hr	
Fan Control	144(c)	Constant Volume	Constant Volume	
DP Sensor Location	144(c)			
Supply Pressure Reset (DDC only)	144(c)	Yes	Yes	
Simultaneous Heat/Cool	144(d)	No	No	
Economizer	144(e)	No Economizer	No Economizer	
Heat Air Supply Reset	144(f)	Constant Temp	Constant Temp	
Cool Air Supply Reset	144(f)	Constant Temp	Constant Temp	
Electric Resistance Heating ¹	144(g)			
Air Cooled Chiller Limitation	144(i)			
Duct Leakage Sealing. If Yes, a MECH-4-A must be submitted	144(k)	No	No	

1. Total installed capacity (MBtu/hr) of all electric heat on this project exclusive of electric auxiliary heat for heat pumps. If electric heat is used explain which exception(s) to §144(g) apply.

WATER SIDE SYSTEM REQUIREMENTS

(Part 2 of 2)

MECH-2C

Project Name: *6th and Oak Street Apartments* Date: *11/12/2010*

WATER ² SIDE SYSTEMS: Chillers, Towers, Boilers, Hydronic Loops			
Item or System Tags (i.e. AC-1, RTU-1, HP-1) ¹			
Number of Systems			
Indicate Page Reference on Plans or Specification ²			
MANDATORY MEASURES	T-24 Sections		
Equipment Efficiency	112(a)		
Pipe Insulation	123		

PRESCRIPTIVE MEASURES			
Cooling Tower Fan Controls	144(a & b)		
Cooling Tower Flow Controls	144(h)		
Variable Flow System Design	144(h)		
Chiller and Boiler Isolation	144(j)		
CHW and HHW Reset Controls	144(j)		
WLHP Isolation Valves	144(j)		
VSD on CHW, CW & WLHP Pumps>5HP	144(j)		
DP Sensor Location	144(j)		

- The proposed equipment need to match the building plans schedule or specifications. If a requirement is not applicable, put "N/A" in the column next to applicable section.
- For each chiller, cooling tower, boiler, and hydronic loop (or groups of similar equipment) fill in the reference to sheet number and/or specification section and paragraph number where the required features are documented. If a requirement is not applicable, put "N/A" in the column next to applicable section.

Service Hot Water, Pool Heating			
Item or System Tags (i.e. WH-1, WHP, DHW, etc...) ¹		<i>DHW Heater</i>	
Number of Systems		<i>2</i>	
Indicate Page Reference on Plans or Schedule ²			
MANDATORY MEASURES	T-24 Sections		

SERVICE HOT WATER			
Certified Water Heater	111, 113(a)	<i>Pennant Boiler B-1/B-2</i>	
Water Heater Efficiency	113(b)	<i>96 %</i>	
Service Water Heating Installation	113(c)	<i>Controls Req.</i>	
Pipe Insulation	123	<i>n/a</i>	

POOL AND SPA			
Pool and Spa Efficiency and Control	114(a)	<i>n/a</i>	
Pool and Spa Installation	114(b)	<i>n/a</i>	
Pool Heater – No Pilot Light	115(c)	<i>n/a</i>	
Spa Heater – No Pilot Light	115(d)	<i>n/a</i>	
Pipe Insulation	123	<i>Required</i>	

- The Proposed equipment needs to match the building plans schedule or specifications. If a requirement is not applicable, put "N/A" in the column next to applicable section.
- For each water heater, pool heater and domestic water loop (or groups of similar equipment) fill in the reference to sheet number and/or specification section and paragraph number where the required features are documented. If a requirement is not applicable, put "N/A" in the column.

MECHANICAL VENTILATION AND REHEAT

MECH-3C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

MECHANICAL VENTILATION (\$121(b)2)											REHEAT LIMITATION (\$144(d))			
AREA BASIS			OCCUPANCY BASIS					VAV MINIMUM						
A	B	C	D	E	F	G	H	I	J	K	L	M	N	
Zone/System	Condition Area (ft ²)	CFM per ft ²	Min CFM By Area B X C	Number Of People	CFM per Person	Min CFM by Occupant E X F	REQ'D V.A. Max of D or G	Design Ventilation Air CFM	50% of Design Zone Supply CFM	B X 0.4 CFM / ft ²	Max. of Columns H, J, K, 300 CFM	Design Minimum Air Setpoint	Transfer Air	
L1 Community Room	690	0.50	345				345	345						
FC-1.1, 1.2						Total	345	345						
L1 Service Office	144	0.15	22				22	22						
FC-1.3						Total	22	22						
L1 Management Office	541	0.15	81	5.4	15.0		81	81						
FC-2.1						Total	81	81						
L1 Conference Room	132	0.50	66	8.8	7.5		66	66						
FC-2.2						Total	66	66						
L1 Manager's Office	242	0.15	36	2.4	15.0		36	36						
FC-2.3						Total	36	36						
Elevator Machine Room	95	0.15	14				14	14						
DS-1						Total	14	14						
L1 Entry Lobby	528	0.15	79	5.3	15.0		79	79						
L1 HP 1						Total	79	79						
L1 Laundry	282	0.15	42	2.8	15.0		42	42						
Totals											Column I Total Design Ventilation Air			
C	Minimum ventilation rate per Section §121, Table 121-A.													
E	Based on fixed seat or the greater of the expected number of occupants and 50% of the CBC occupant load for egress purposes for spaces without fixed seating.													
H	Required Ventilation Air (REQ'D V.A.) is the larger of the ventilation rates calculated on an AREA BASIS or OCCUPANCY BASIS (Column D or G).													
I	Must be greater than or equal to H, or use Transfer Air (column N) to make up the difference.													
J	Design fan supply CFM (Fan CFM) x 50%; or the design zone outdoor airflow rate per §121.													
K	Condition area (ft ²) x 0.4 CFM / ft ² ; or													
L	Maximum of Columns H, J, K, or 300 CFM													
M	This must be less than or equal to Column L and greater than or equal to the sum of Columns H plus N.													
N	Transfer Air must be provided where the Required Ventilation Air (Column H) is greater than the Design Minimum Air (Column M). Where required, transfer air must be greater than or equal to the difference between the Required Ventilation Air (Column H) and the Design Minimum Air (Column M), Column H minus M.													

MECHANICAL VENTILATION AND REHEAT

MECH-3C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

MECHANICAL VENTILATION (\$121(b)2)													REHEAT LIMITATION (\$144(d))			
AREA BASIS													VAV MINIMUM			
A	B	C	D	E	F	G	H	I	J	K	L	M	N			
Zone/System	Condition Area (ft ²)	CFM per ft ²	Min CFM By Area B X C	Number Of People	CFM per Person	Min CFM by Occupant E X F	REQ'D V.A. Max of D or G	Design Ventilation Air CFM	50% of Design Zone Supply CFM	B X 0.4 CFM / ft ²	Max. of Columns H, J, K, 300 CFM	Design Minimum Air Setpoint	Transfer Air			
L1 HP 2						Total	42	42								
L6 Corridor	1,082	0.15	162	10.8	15.0	162	162									
L5 Corridor	1,082	0.15	162	10.8	15.0	162	162									
L4 Corridor	1,082	0.15	162	10.8	15.0	162	162									
L3 Corridor	1,082	0.15	162	10.8	15.0	162	162									
L2 Corridor	1,028	0.15	154	10.3	15.0	154	154									
MU-1						Total	803	5,125		100% OA						
L2 Room North Wing	1,224	0.15	184	6.1	30.0	184	184									
L2 Room East Wing	2,663	0.15	399	13.3	30.0	399	399									
L2 Room South Wing	1,254	0.15	188	6.3	30.0	188	188									
L2 Room West Wing	2,522	0.15	378	12.6	30.0	378	378									
L2 Wall Heater #201-214						Total	1,149	1,149								
L3 BED North Wing	1,224	0.15	184	6.1	30.0	184	184									
L3 BED East Wing	2,665	0.15	400	13.3	30.0	400	400									
L3 BED South Wing	1,252	0.15	188	6.3	30.0	188	188									
Totals													Column I Total Design Ventilation Air			

C Minimum ventilation rate per Section §121, Table 121-A.

E Based on fixed seat or the greater of the expected number of occupants and 50% of the CBC occupant load for egress purposes for spaces without fixed seating.

H Required Ventilation Air (REQ'D V.A.) is the larger of the ventilation rates calculated on an AREA BASIS or OCCUPANCY BASIS (Column D or G).

I Must be greater than or equal to H, or use Transfer Air (column N) to make up the difference.

J Design fan supply CFM (Fan CFM) x 50%; or the design zone outdoor airflow rate per §121.

K Condition area (ft²) x 0.4 CFM / ft²; or

L Maximum of Columns H, J, K, or 300 CFM

M This must be less than or equal to Column L and greater than or equal to the sum of Columns H plus N.

N Transfer Air must be provided where the Required Ventilation Air (Column H) is greater than the Design Minimum Air (Column M). Where required, transfer air must be greater than or equal to the difference between the Required Ventilation Air (Column H) and the Design Minimum Air (Column M), Column H minus M.

MECHANICAL VENTILATION AND REHEAT

MECH-3C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

MECHANICAL VENTILATION (\$121(b)2)													REHEAT LIMITATION (\$144(d))				
AREA BASIS													VAV MINIMUM				
A	B	C	D	E	F	G	H	I	J	K	L	M	N				
Zone/System	Condition Area (ft ²)	CFM per ft ²	Min CFM By Area B X C	Number Of People	CFM per Person	Min CFM by Occupant E X F	REQ'D V.A. Max of D or G	Design Ventilation Air CFM	50% of Supply CFM	B X 0.4 CFM / ft ²	Max. of Columns H, J, K, 300 CFM	Design Minimum Air Setpoint	Transfer Air				
L3 BED West Wing	2,522	0.15	378	12.6	30.0	378	378	378									
L3 Wall Heater #301-314						Total	1,149	1,149									
L4 BED North Wing	1,223	0.15	183	6.1	30.0	183	183	183									
L4 BED East Wing	2,662	0.15	399	13.3	30.0	399	399	399									
L4 BED South Wing	1,255	0.15	188	6.3	30.0	188	188	188									
L4 BED West Wing	2,522	0.15	378	12.6	30.0	378	378	378									
L4 Wall Heater #401-414						Total	1,149	1,149									
L5 BED North Wing	1,224	0.15	184	6.1	30.0	184	184	184									
L5 BED East Wing	2,663	0.15	399	13.3	30.0	399	399	399									
L5 BED South Wing	1,254	0.15	188	6.3	30.0	188	188	188									
L5 BED West Wing	2,522	0.15	378	12.6	30.0	378	378	378									
L5 Wall Heater #501-514						Total	1,149	1,149									
L6 BED North Wing	1,224	0.15	184	6.1	30.0	184	184	184									
L6 BED East Wing	2,662	0.15	399	13.3	30.0	399	399	399									
L6 BED South Wing	1,254	0.15	188	6.3	30.0	188	188	188									
Totals																	Column I Total Design Ventilation Air

C	Minimum ventilation rate per Section §121, Table 121-A.
E	Based on fixed seat or the greater of the expected number of occupants and 50% of the CBC occupant load for egress purposes for spaces without fixed seating.
H	Required Ventilation Air (REQ'D V.A.) is the larger of the ventilation rates calculated on an AREA BASIS or OCCUPANCY BASIS (Column D or G).
I	Must be greater than or equal to H, or use Transfer Air (column N) to make up the difference.
J	Design fan supply CFM (Fan CFM) x 50%; or the design zone outdoor airflow rate per §121.
K	Condition area (ft ²) x 0.4 CFM / ft ² ; or
L	Maximum of Columns H, J, K, or 300 CFM
M	This must be less than or equal to Column L and greater than or equal to the sum of Columns H plus N.
N	Transfer Air must be provided where the Required Ventilation Air (Column H) is greater than the Design Minimum Air (Column M). Where required, transfer air must be greater than or equal to the difference between the Required Ventilation Air (Column H) and the Design Minimum Air (Column M), Column H minus M.

MECHANICAL VENTILATION AND REHEAT

MECH-3C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

		MECHANICAL VENTILATION (\$121(b)2)					REHEAT LIMITATION (\$144(d))						
		AREA BASIS			OCCUPANCY BASIS		VAV MINIMUM						
A	B	C	D	E	F	G	H	I	J	K	L	M	N
Zone/System	Condition Area (ft ²)	CFM per ft ²	Min CFM By Area B X C	Number Of People	CFM per Person	Min CFM by Occupant E X F	REQ'D V.A. Max of D or G	Design Ventilation Air CFM	50% of Design Zone Supply CFM	B X 0.4 CFM / ft ²	Max. of Columns H, J, K, 300 CFM	Design Minimum Air Setpoint	Transfer Air
L6 BED West Wing	2,522	0.15	378	12.6	30.0	378	378	378					
L6 Wall Heater #601-614						Total	1,149	1,149					
			Totals										Column I Total Design Ventilation Air

C	Minimum ventilation rate per Section §121, Table 121-A.
E	Based on fixed seat or the greater of the expected number of occupants and 50% of the CBC occupant load for egress purposes for spaces without fixed seating.
H	Required Ventilation Air (REQ'D V.A.) is the larger of the ventilation rates calculated on an AREA BASIS or OCCUPANCY BASIS (Column D or G).
I	Must be greater than or equal to H, or use Transfer Air (column N) to make up the difference.
J	Design fan supply CFM (Fan CFM) x 50%; or the design zone outdoor airflow rate per §121.
K	Condition area (ft ²) x 0.4 CFM / ft ² ; or
L	Maximum of Columns H, J, K, or 300 CFM
M	This must be less than or equal to Column L and greater than or equal to the sum of Columns H plus N.
N	Transfer Air must be provided where the Required Ventilation Air (Column H) is greater than the Design Minimum Air (Column M). Where required, transfer air must be greater than or equal to the difference between the Required Ventilation Air (Column H) and the Design Minimum Air (Column M), Column H minus M.

MECHANICAL EQUIPMENT DETAILS

(Part 1 of 2)

MECH-5C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

CHILLER AND TOWER SUMMARY

PUMPS									
Equipment Name	Type	Qty.	Efficiency	Tons	Qty.	GPM	BHP	Premium Eff. Motor	Pump Control
								<input type="checkbox"/>	
								<input type="checkbox"/>	
								<input type="checkbox"/>	

DHW / BOILER SUMMARY

System Name	Type	Distribution	Qty.	Rated Input	Vol. (Gals.)	Energy Factor or RE	Standby Loss or Pilot	Tank Ext. R-Value	Status
Pennant Boiler B-1/B-2	Large Gas	Central System	2	500,000	0	0.96	0.00 %	0.0	New

MULTI-FAMILY CENTRAL WATER HEATING DETAILS

Hot Water Pump									
Control	Qty.	HP	Type	In Plenum	Outside	Buried	Add 1/2" Insulation		
Temperature	1	1.0		Premium	0	100	0		<input type="checkbox"/>
									<input type="checkbox"/>
									<input type="checkbox"/>

CENTRAL SYSTEM RATINGS

System Name	Type	Qty.	HEATING			COOLING			Status
			Output	Aux. kW	Efficiency	Output	Efficiency		
FC-1.1, 1.2	Split DX	2	14,000	0.0	n/a	12,000	13.0 SEER / 10.0 EER	New	
FC-1.3	Split DX	1	11,000	0.0	n/a	9,500	13.0 SEER / 10.0 EER	New	
FC-2.1	Split DX	1	20,500	0.0	n/a	17,800	13.0 SEER / 10.0 EER	New	
FC-2.2	Split DX	1	11,000	0.0	n/a	9,500	13.0 SEER / 10.0 EER	New	
FC-2.3	Split DX	1	11,000	0.0	n/a	9,500	13.0 SEER / 10.0 EER	New	
DS-1	Split DX	1	0	0.0	8.80 HSPF	24,200	18.0 SEER / 10.0 EER	New	
HP #1	Split DX	1	36,800	0.0	8.80 HSPF	32,300	14.5 SEER / 10.0 EER	New	

CENTRAL SYSTEM FAN SUMMARY

System Name	Fan Type	Economizer Type	SUPPLY FAN			RETURN FAN		
			CFM	BHP	Premium Eff. Motor	CFM	BHP	Premium Eff. Motor
FC-1.1, 1.2	Constant Volume	No Economizer	312	0.03	<input type="checkbox"/>	none	none	<input type="checkbox"/>
FC-1.3	Constant Volume	No Economizer	271	0.03	<input type="checkbox"/>	none	none	<input type="checkbox"/>
FC-2.1	Constant Volume	No Economizer	347	0.04	<input type="checkbox"/>	none	none	<input type="checkbox"/>
FC-2.2	Constant Volume	No Economizer	271	0.03	<input type="checkbox"/>	none	none	<input type="checkbox"/>
FC-2.3	Constant Volume	No Economizer	271	0.03	<input type="checkbox"/>	none	none	<input type="checkbox"/>
DS-1	Constant Volume	No Economizer	525	0.05	<input type="checkbox"/>	none	none	<input type="checkbox"/>
HP #1	Constant Volume	No Economizer	1,076	0.11	<input type="checkbox"/>	none	none	<input type="checkbox"/>

MECHANICAL EQUIPMENT DETAILS

(Part 1 of 2)

MECH-5C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

CHILLER AND TOWER SUMMARY

Equipment Name	Type	Qty.	Efficiency	Tons	Qty.	GPM	BHP	PUMPS		
								Premium Eff. Motor	BHP	Pump Control
								<input type="checkbox"/>		
								<input type="checkbox"/>		
								<input type="checkbox"/>		

DHW / BOILER SUMMARY

System Name	Type	Distribution	Qty.	Rated Input	Vol. (Gals.)	Energy Factor or RE	Standby Loss or Pilot	Tank Ext. R-Value	Status

MULTI-FAMILY CENTRAL WATER HEATING DETAILS

Control	Qty.	HP	Type	Hot Water Piping Length (ft)		
				In Plenum	Outside	Buried

CENTRAL SYSTEM RATINGS

System Name	Type	Qty.	HEATING			COOLING			Status
			Output	Aux. kW	Efficiency	Output	Efficiency		
HP #2	Split DX	1	37,300	0.0	8.80 HSPFF	33,600	14.5 SEER / 10.0 EER	New	
MU-1	Split DX	1	200,000	0.0	78% AFUE	0	n/a	New	
WH-1/WH-2	Split DX	140	3,077	0.0	n/a	0	n/a	New	

CENTRAL SYSTEM FAN SUMMARY

System Name	Fan Type	Economizer Type	SUPPLY FAN			RETURN FAN		
			CFM	BHP	Premium Eff. Motor	CFM	BHP	Premium Eff. Motor
HP #2	Constant Volume	No Economizer	1,076	0.01	<input type="checkbox"/>	none		<input type="checkbox"/>
MU-1	Constant Volume	100% Outside Air	5,125	3.00	<input checked="" type="checkbox"/>	none		<input type="checkbox"/>
WH-1/WH-2	Constant Volume	No Economizer	none		<input type="checkbox"/>	none		<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>

MECHANICAL EQUIPMENT DETAILS

(Part 2 of 2)

MECH-5C

Project Name

6th and Oak Street Apartments

Date

11/12/2010

ZONE SYSTEM SUMMARY

Zone Name	System Name	Type	SYSTEM				VAV		Fan		Premium Eff. Motor	Fan Cycles	ECM Motor	Outside Air
			Qty.	Heating	Cooling	Min CFM Ratio	Reheat Coil	CFM	BHP					
L2 Room North Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L2 Room East Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L2 Room South Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L2 Room West Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L3 BED North Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L3 BED East Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L3 BED South Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L3 BED West Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L4 BED North Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L4 BED East Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L4 BED South Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L4 BED West Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L5 BED North Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L5 BED East Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L5 BED South Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L5 BED West Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L6 BED North Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L6 BED East Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L6 BED South Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		
L6 BED West Wing	10 kBtu Baseboard	VAV Box	14	10,000		100 %	None				<input type="checkbox"/>	<input type="checkbox"/>		

EXHAUST FAN SUMMARY

EXHAUST FAN				EXHAUST FAN				EXHAUST FAN				
Room Name	Qty.	CFM	BHP	Room Name	Qty.	CFM	BHP	Room Name	Qty.	CFM	BHP	Premium Eff. Motor
												<input type="checkbox"/>
												<input type="checkbox"/>
												<input type="checkbox"/>
												<input type="checkbox"/>

ENVELOPE MANDATORY MEASURES: NONRESIDENTIAL**ENV-MM**

Project Name

6th and Oak Street Apartments

Date

11/12/2010

DESCRIPTION**Building Envelope Measures:**

- §118(a): Installed insulating material shall have been certified by the manufacturer to comply with the California Quality Standards for insulating material, Title 20 Chapter 4, Article 3.
- §118(c): All Insulating Materials shall be installed in compliance with the flame spread rating and smoke density requirements of Sections 2602 and 707 of Title 24, Part 2.
- §118(f): The opaque portions of framed demising walls in nonresidential buildings shall have insulation with an installed R-value of no less than R-13 between framing members.
- §117(a): All Exterior Joints and openings in the building that are observable sources of air leakage shall be caulked, gasketed, weatherstripped or otherwise sealed.
- §116(a) 1: Manufactured fenestration products and exterior doors shall have air infiltration rates not exceeding 0.3 cfm/ft.² of window area, 0.3 cfm/ft.² of door area for residential doors, 0.3 cfm/ft.² of door area for nonresidential single doors (swinging and sliding), and 1.0 cfm/ft.² for nonresidential double doors (swinging).
- §116(a) 2: Fenestration U-factor shall be rated in accordance with NFRC 100, or the applicable default U-factor.
- §116(a) 3: Fenestration SHGC shall be rated in accordance with NFRC 200, or NFRC 100 for site-built fenestration, or the applicable default SHGC.
- §116(b): Site Constructed Doors, Windows and Skylights shall be caulked between the unit and the building, and shall be weatherstripped (except for unframed glass doors and fire doors).

LIGHTING MANDATORY MEASURES: NONRESIDENTIAL**LTG-MM**Project Name
*6th and Oak Street Apartments*Date
*11/12/2010***Indoor Lighting Measures:****§131(d): Shut-off Controls**

For every floor, all interior lighting systems shall be equipped with a separate automatic control to shut off the lighting.

1. This automatic control shall meet the requirements of Section 119 and may be an occupancy sensor, automatic time switch, or other device capable of automatically shutting off the lighting.

2. Override for Building Lighting Shut-off: The automatic building shut-off system is provided with a manual, accessible override switch in sight of the lights. The area of override is not to exceed 5,000 square feet.

§119(h): Automatic Control Devices Certified: All automatic control devices specified are certified, all alternate equipment shall be certified and installed as directed by the manufacturer.

§111: Fluorescent Ballast and Luminaires Certified: All fluorescent fixtures specified for the project are certified and listed in the Directory. All installed fixtures shall be certified.

§131(a): Individual Room/Area Controls: Each room and area in this building is equipped with a separate switch or occupancy sensor device for each area with floor-to-ceiling walls.

§131(b): Uniform Reduction for Individual Rooms: All rooms and areas greater than 100 square feet and more than 0.8 watts per square foot of lighting load shall be controlled with bi-level switching for uniform reduction of lighting within the room.

§131(c): Daylight Area Control: All rooms with windows and skylights that are greater than 250 square feet and that allow for the effective use of daylight in the area shall have 50% of the lamps in each daylit area controlled by a separate switch; or the effective use of daylight cannot be accomplished because the windows are continuously shaded by a building on the adjacent lot. Diagram of shading during different times of the year is included on plans.

§131(c): Display Lighting. Display lighting shall be separately switched on circuits that are 20 amps or less.6.

Outdoor Lighting Measures:

§130(c)1: Mandatory lighting power determination for medium base sockets without permanently installed ballasts

§132(a): All permanently installed luminaires with lamps rated over 100 Watts either have a lamp efficacy of at least 60 lumens per Watt or are controlled by a motion sensor.

§132(b): All Luminaires with lamps rated greater than 175 Watts in hardscape area, including parking lots, building entrances, canopies, and all outdoor sales areas meet the Cutoff Requirements.

§132(c)1: All permanently installed outdoor lighting meets the control requirements listed.

§132(c): Building facades, parking lots, garages, canopies, and outdoor sales areas meet the Multi-Level Lighting Requirements listed.

MECHANICAL MANDATORY MEASURES: NONRESIDENTIAL**MECH-MM**

Project Name

6th and Oak Street Apartments

Date

11/12/2010

Equipment and System Efficiencies

- §111: Any appliance for which there is a California standard established in the Appliance Efficiency Regulations will comply with the applicable standard.
- §115(a): Fan type central furnaces shall not have a pilot light.
- §123: Piping, except that conveying fluids at temperatures between 60 and 105 degrees Fahrenheit, or within HVAC equipment, shall be insulated in accordance with Standards Section 123.
- §124: Air handling duct systems shall be installed and insulated in compliance with Sections 601, 602, 603, 604, and 605 of the CMC Standards.

Controls

- §122(e): Each space conditioning system shall be installed with one of the following:
- 1A. Each space conditioning system serving building types such as offices and manufacturing facilities (and all others not explicitly exempt from the requirements of Section 112 (d)) shall be installed with an automatic time switch with an accessible manual override that allows operation of the system during off-hours for up to 4 hours. The time switch shall be capable of programming different schedules for weekdays and weekends and have program backup capabilities that prevent the loss of the device's program and time setting for at least 10 hours if power is interrupted; or
 - 1B. An occupancy sensor to control the operating period of the system; or
 - 1C. A 4-hour timer that can be manually operated to control the operating period of the system.
2. Each space conditioning system shall be installed with controls that temporarily restart and temporarily operate the system as required to maintain a setback heating and/or a setup cooling thermostat setpoint.
- §122(g): Each space conditioning system serving multiple zones with a combined conditioned floor area more than 25,000 square feet shall be provided with isolation zones. Each zone: shall not exceed 25,000 square feet; shall be provided with isolation devices, such as valves or dampers that allow the supply of heating or cooling to be setback or shut off independently of other isolation areas; and shall be controlled by a time control device as described above.
- §122(c): Thermostats shall have numeric setpoints in degrees Fahrenheit (F) and adjustable setpoint stops accessible only to authorized personnel.
- §122(b): Heat pumps shall be installed with controls to prevent electric resistance supplementary heater operation when the heating load can be met by the heat pump alone
- §122(a&b): Each space conditioning system shall be controlled by an individual thermostat that responds to temperature within the zone. Where used to control heating, the control shall be adjustable down to 55 degrees F or lower. For cooling, the control shall be adjustable up to 85 degrees F or higher. Where used for both heating and cooling, the control shall be capable of providing a deadband of at least 5 degrees F within which the supply of heating and cooling is shut off or reduced to a minimum.

Ventilation

- §121(e): Controls shall be provided to allow outside air dampers or devices to be operated at the ventilation rates as specified on these plans.
- §122(f): All gravity ventilating systems shall be provided with automatic or readily accessible manually operated dampers in all openings to the outside, except for combustion air openings.
- §121(f): Ventilation System Acceptance. Before an occupancy permit is granted for a newly constructed building or space, or a new ventilating system serving a building or space is operated for normal use, all ventilation systems serving the building or space shall be certified as meeting the Acceptance Requirements for Code Compliance

Service Water Heating Systems

- §113(c) Installation
3. Temperature controls for public lavatories. The controls shall limit the outlet Temperature to 110° F.
 2. Circulating service water-heating systems shall have a control capable of automatically turning off the circulating pump when hot water is not required.

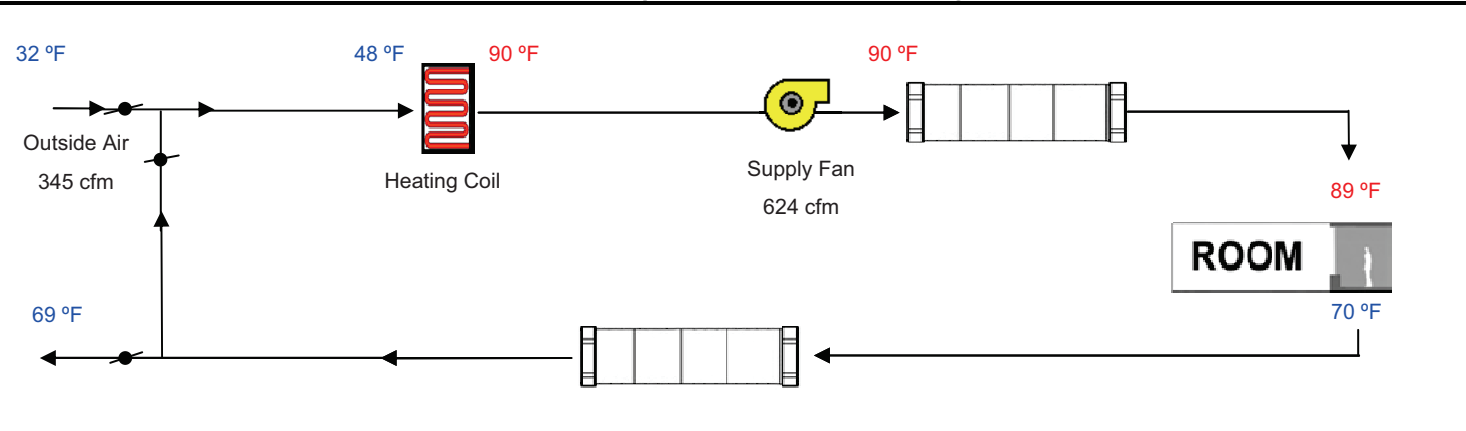
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name FC-1.1, 1.2	Floor Area 690

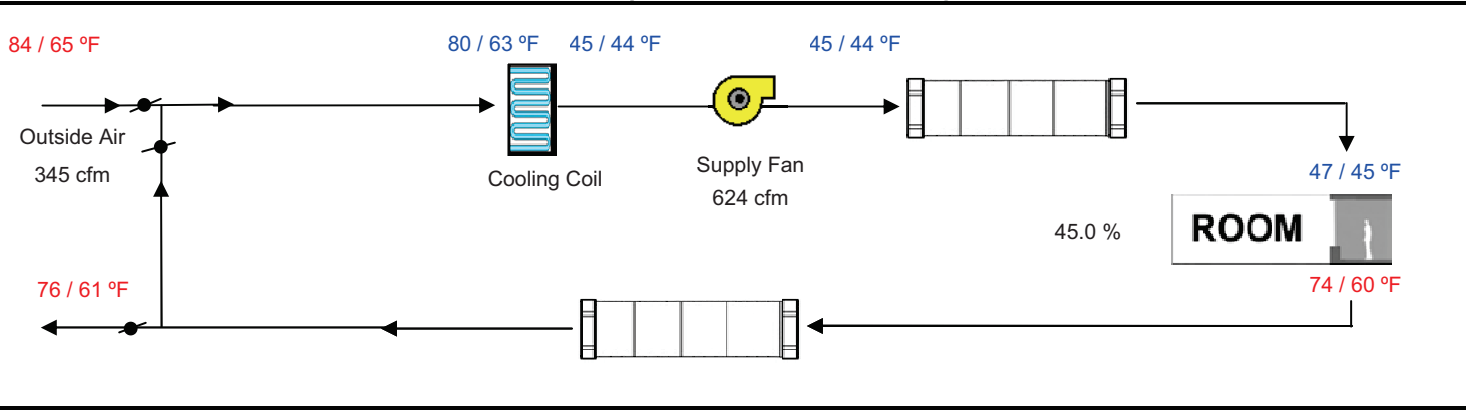
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	2	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	14,000		1,242	35,845	7,166	873	17,593
Total Output (Btuh)	28,000			0			
Output (Btuh/sqft)	40.6			1,792			880
Cooling System				0			0
Output per System	12,000		345	2,980	1,021	345	13,669
Total Output (Btuh)	24,000			0			0
Total Output (Tons)	2.0			1,792			880
Total Output (Btuh/sqft)	34.8						
Total Output (sqft/Ton)	345.0		42,410	8,186		33,022	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	312	FC-1.1, 1.2				
Airflow (cfm)	624		23,682	0		28,000
Airflow (cfm/sqft)	0.90					
Airflow (cfm/Ton)	312.0					
Outside Air (%)	55.3 %		Total Adjusted System Output (Adjusted for Peak Design conditions)			28,000
Outside Air (cfm/sqft)	0.50					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK		Jul 3 PM	Jan 1 AM	

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



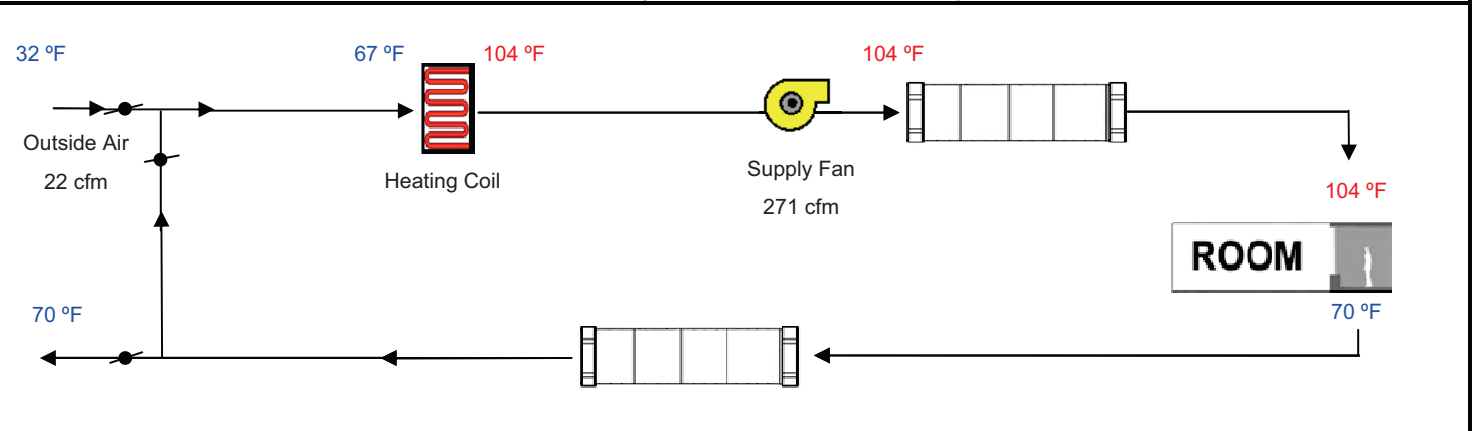
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name FC-1.3	Floor Area 144

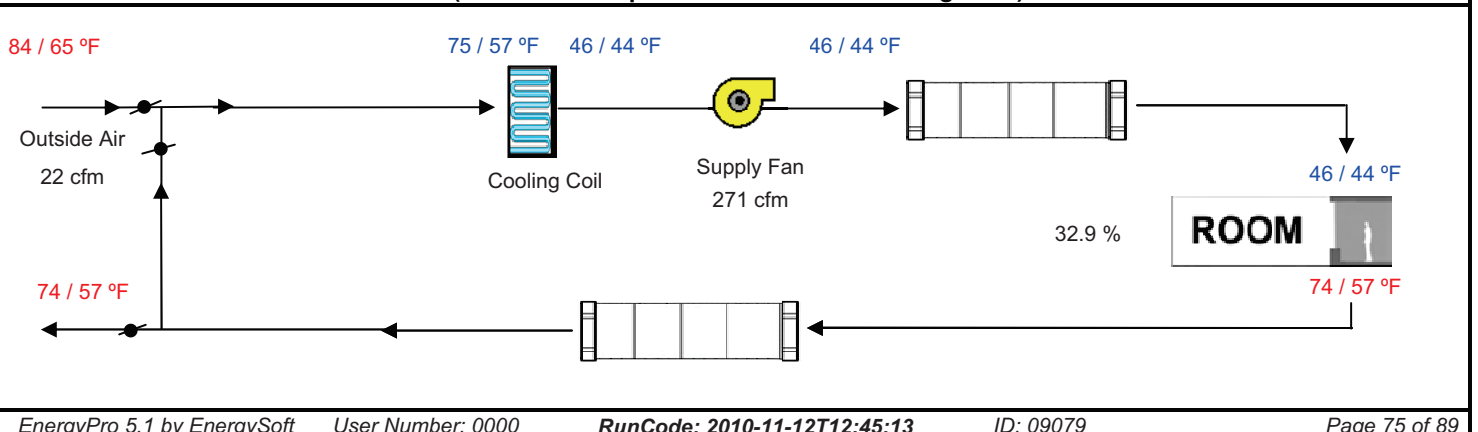
ENGINEERING CHECKS		SYSTEM LOAD							
Number of Systems	1				COIL COOLING PEAK		COIL HTG. PEAK		
Heating System					CFM	Sensible	Latent	CFM	Sensible
Output per System	11,000	Total Room Loads			57	1,732	288	36	1,332
Total Output (Btuh)	11,000	Return Vented Lighting				0			
Output (Btuh/sqft)	76.4	Return Air Ducts				87			67
Cooling System		Return Fan				0			0
Output per System	9,500	Ventilation			22	226	293	22	881
Total Output (Btuh)	9,500	Supply Fan				0			0
Total Output (Tons)	0.8	Supply Air Ducts				87			67
Total Output (Btuh/sqft)	66.0	TOTAL SYSTEM LOAD				2,131	581		2,346
Total Output (sqft/Ton)	181.9								

Air System		HVAC EQUIPMENT SELECTION						
CFM per System	271							
Airflow (cfm)	271	FC-1.3	8,631	0			11,000	
Airflow (cfm/sqft)	1.88							
Airflow (cfm/Ton)	342.3							
Outside Air (%)	8.0 %	Total Adjusted System Output (Adjusted for Peak Design conditions)			8,631	0		11,000
Outside Air (cfm/sqft)	0.15							
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Jan 10 PM		Jan 1 AM	

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



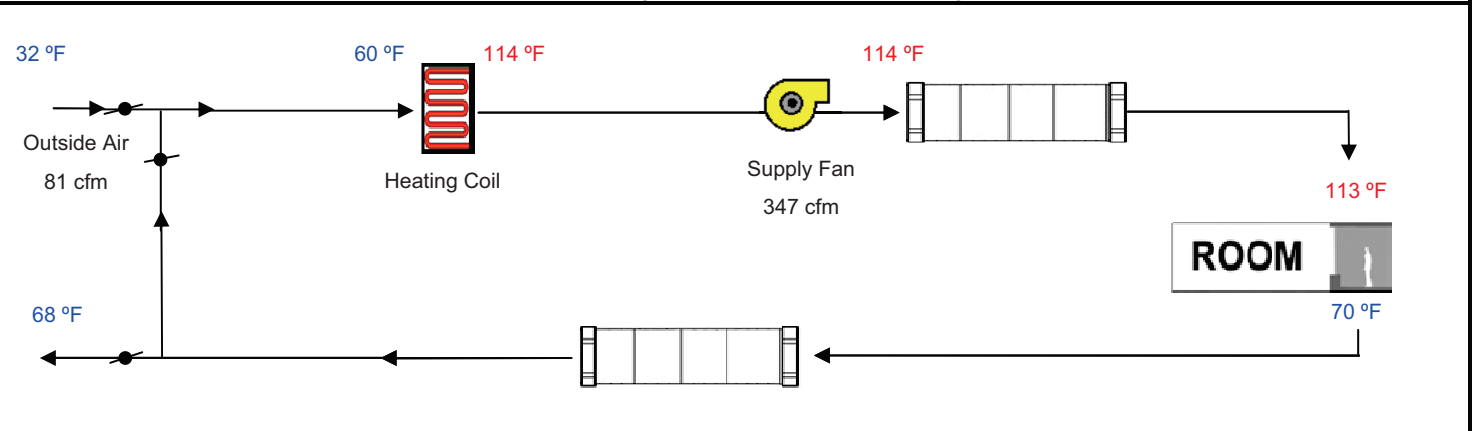
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name FC-2.1	Floor Area 541

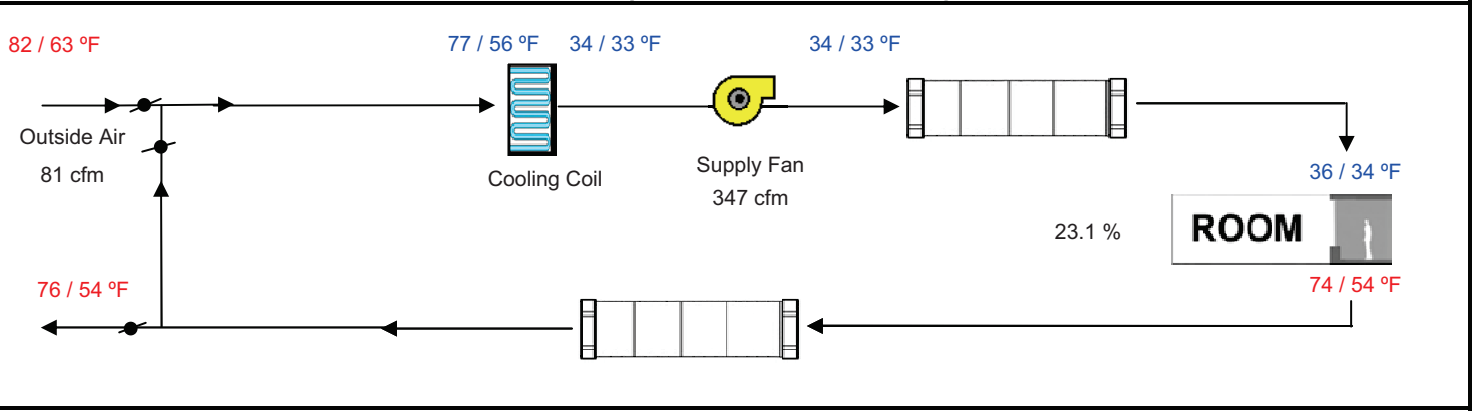
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	1	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	20,500		644	26,123	1,082	303	13,927
Total Output (Btuh)	20,500			0			
Output (Btuh/sqft)	37.9			1,306			696
Cooling System				0			0
Output per System	17,800		81	526	1,526	81	3,167
Total Output (Btuh)	17,800			0			0
Total Output (Tons)	1.5			1,306			696
Total Output (Btuh/sqft)	32.9						
Total Output (sqft/Ton)	364.7		29,261	2,608		18,486	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	347	FC-2.1	16,104	0		20,500
Airflow (cfm)	347					
Airflow (cfm/sqft)	0.64					
Airflow (cfm/Ton)	233.9					
Outside Air (%)	23.4 %	Total Adjusted System Output (Adjusted for Peak Design conditions)	16,104	0		20,500
Outside Air (cfm/sqft)	0.15					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Oct 3 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



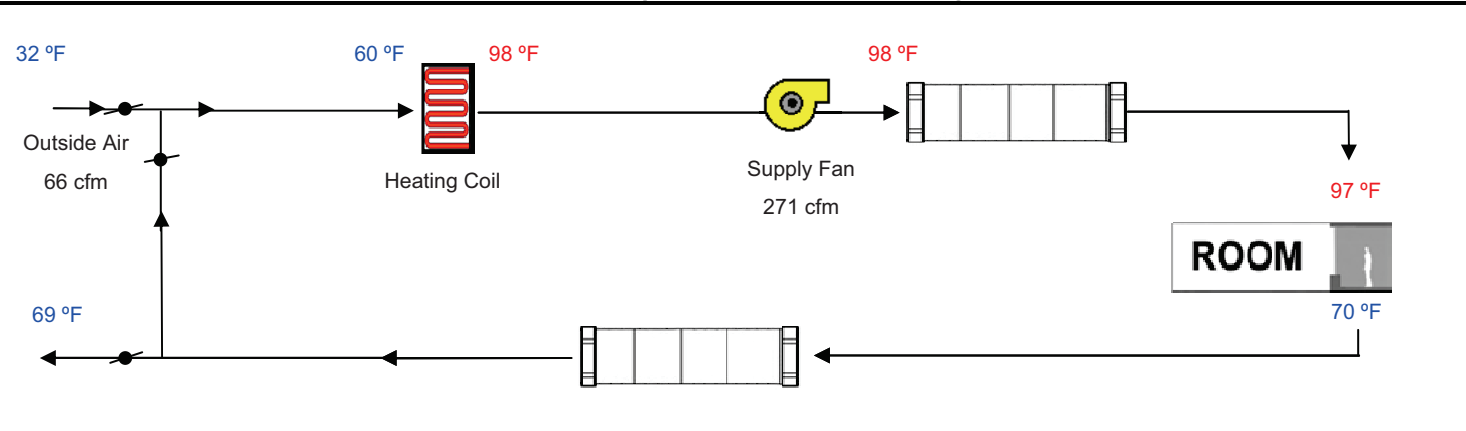
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name FC-2.2	Floor Area 132

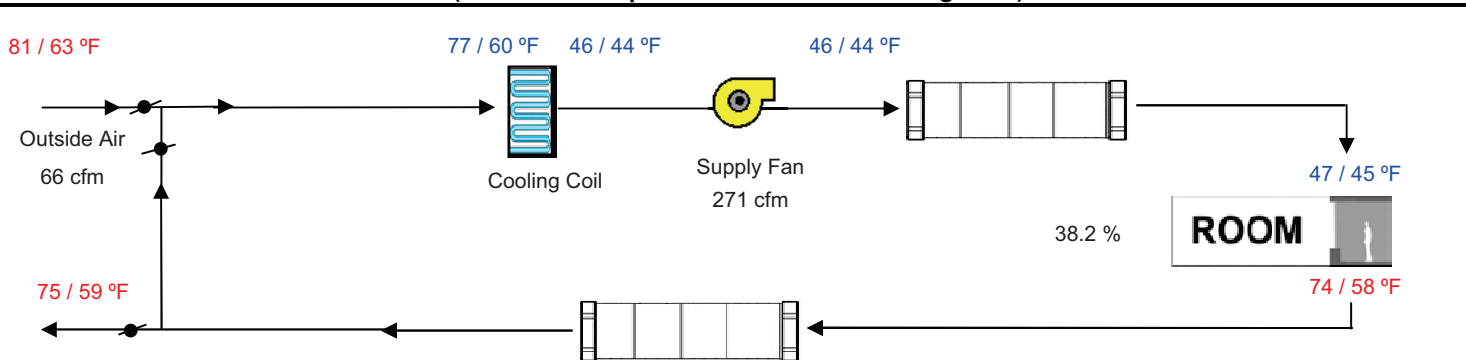
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	1	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	11,000		279	8,062	1,371	113	3,344
Total Output (Btuh)	11,000			0			
Output (Btuh/sqft)	83.3			403			167
Cooling System				0			0
Output per System	9,500		66	429	381	66	2,667
Total Output (Btuh)	9,500			0			0
Total Output (Tons)	0.8			403			167
Total Output (Btuh/sqft)	72.0						
Total Output (sqft/Ton)	166.7		9,297	1,752		6,346	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	271	FC-2.2	9,052	0		11,000
Airflow (cfm)	271					
Airflow (cfm/sqft)	2.05					
Airflow (cfm/Ton)	342.3					
Outside Air (%)	24.4 %	Total Adjusted System Output (Adjusted for Peak Design conditions)		9,052	0	11,000
Outside Air (cfm/sqft)	0.50					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Feb 4 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



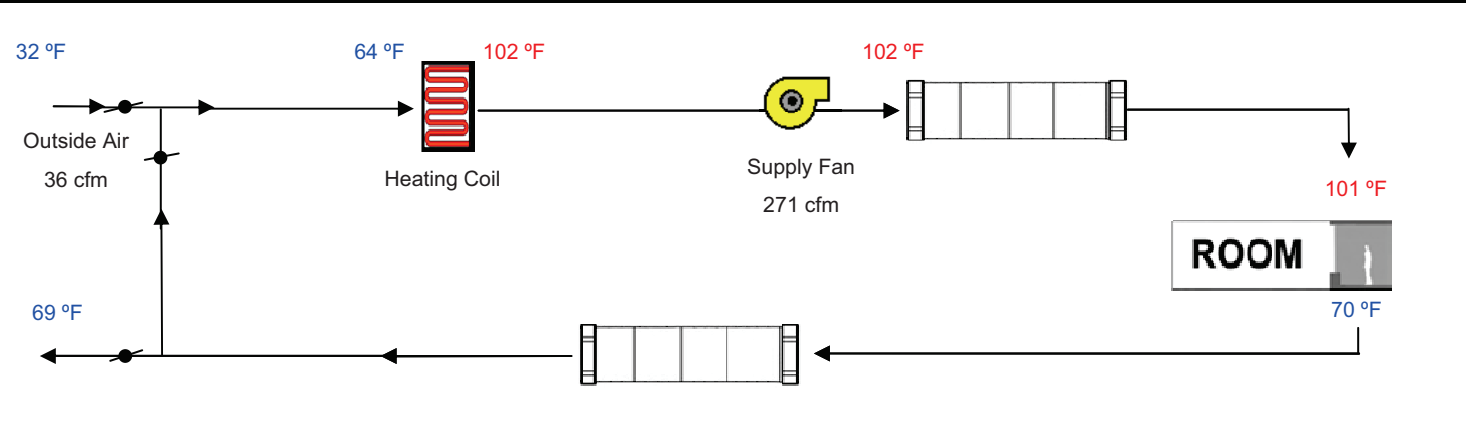
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name FC-2.3	Floor Area 242

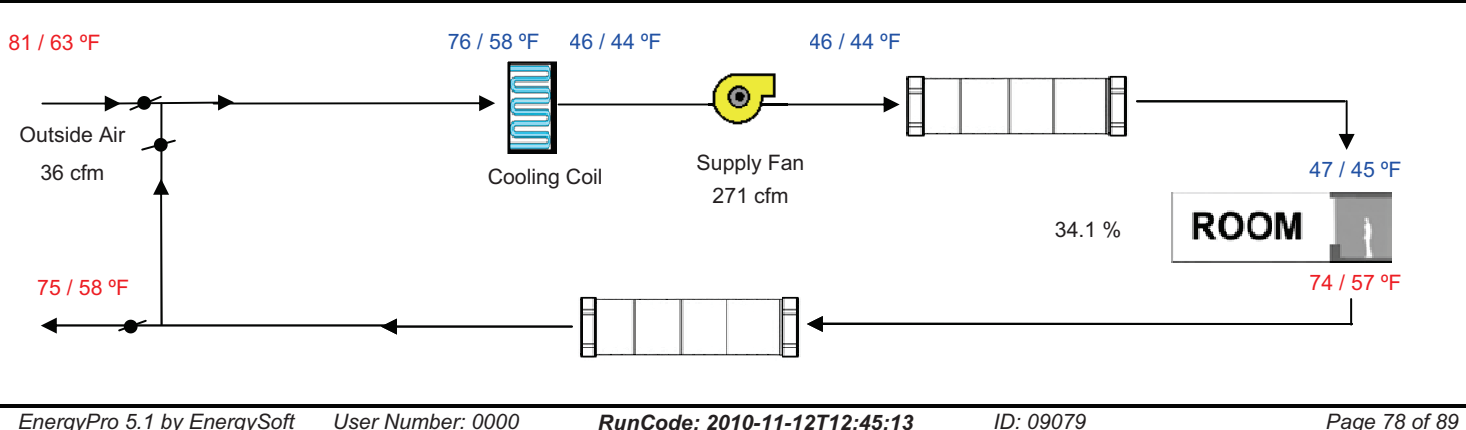
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	1	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	11,000		261	7,571	484	112	3,791
Total Output (Btuh)	11,000			0			
Output (Btuh/sqft)	45.5			379			190
Cooling System				0			0
Output per System	9,500		36	239	340	36	1,464
Total Output (Btuh)	9,500			0			0
Total Output (Tons)	0.8			379			190
Total Output (Btuh/sqft)	39.3						
Total Output (sqft/Ton)	305.7		8,567	824		5,634	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	271	FC- 2.3	8,850	0		11,000
Airflow (cfm)	271					
Airflow (cfm/sqft)	1.12					
Airflow (cfm/Ton)	342.3					
Outside Air (%)	13.4 %	Total Adjusted System Output (Adjusted for Peak Design conditions)	8,850	0		11,000
Outside Air (cfm/sqft)	0.15					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Feb 4 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



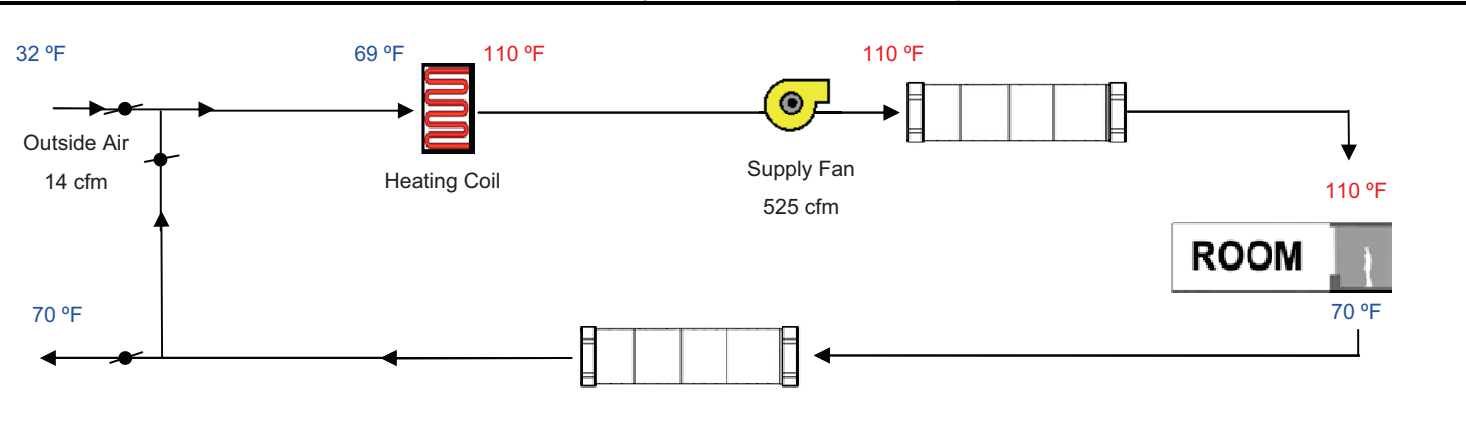
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name DS-1	Floor Area 95

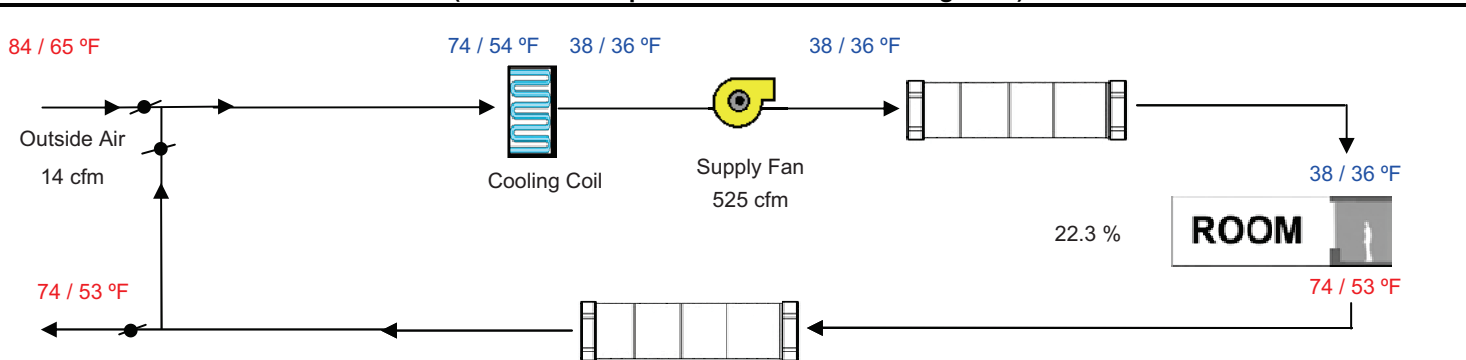
ENGINEERING CHECKS		SYSTEM LOAD							
Number of Systems	1				COIL COOLING PEAK		COIL HTG. PEAK		
Heating System					CFM	Sensible	Latent	CFM	Sensible
Output per System	0	Total Room Loads			14	558	71	0	0
Total Output (Btuh)	0	Return Vented Lighting				0			
Output (Btuh/sqft)	0.0	Return Air Ducts				28			0
Cooling System		Return Fan				0			0
Output per System	24,200	Ventilation			14	152	321	14	582
Total Output (Btuh)	24,200	Supply Fan				0			0
Total Output (Tons)	2.0	Supply Air Ducts				28			0
Total Output (Btuh/sqft)	256.1	TOTAL SYSTEM LOAD				767	392		582
Total Output (sqft/Ton)	46.9								

Air System		HVAC EQUIPMENT SELECTION						
CFM per System	525							
Airflow (cfm)	525	DS-1	20,820	0			0	
Airflow (cfm/sqft)	5.56							
Airflow (cfm/Ton)	260.3							
Outside Air (%)	2.7 %	Total Adjusted System Output (Adjusted for Peak Design conditions)			20,820	0		0
Outside Air (cfm/sqft)	0.15							
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Jan 10 PM		Jan 1 AM	

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



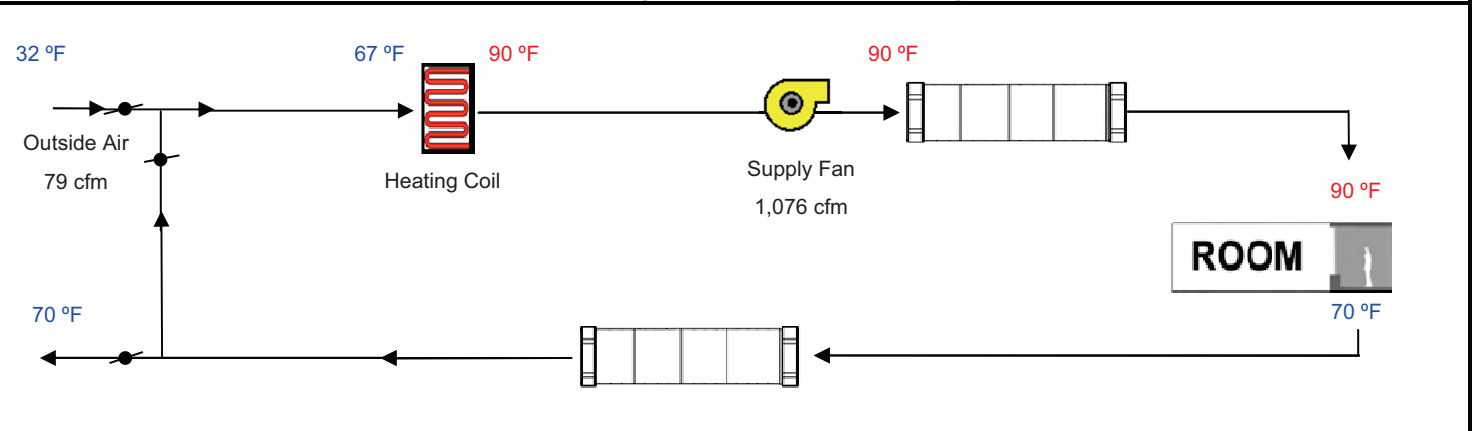
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L1 HP 1	Floor Area 528

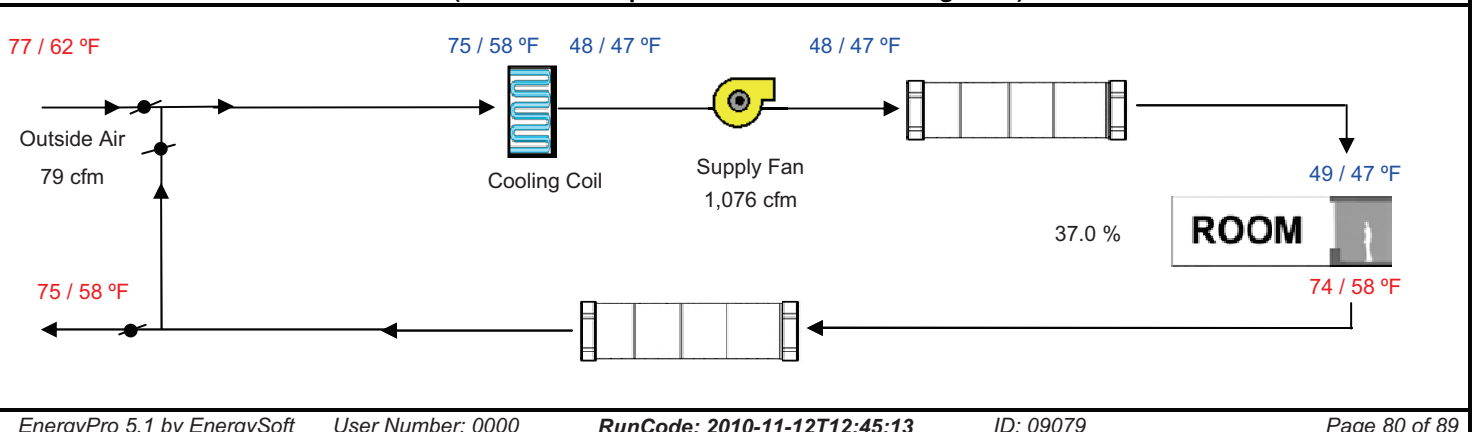
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	1	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	36,800		558	15,056	1,320	448	9,433
Total Output (Btuh)	36,800			0			
Output (Btuh/sqft)	69.7			753			472
Cooling System				0			0
Output per System	32,300		79	235	556	79	3,215
Total Output (Btuh)	32,300			0			0
Total Output (Tons)	2.7			753			472
Total Output (Btuh/sqft)	61.2						
Total Output (sqft/Ton)	196.2						

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	1,076	HP #1	30,792	0		26,838
Airflow (cfm)	1,076					
Airflow (cfm/sqft)	2.04					
Airflow (cfm/Ton)	399.8					
Outside Air (%)	7.4 %	Total Adjusted System Output (Adjusted for Peak Design conditions)	30,792	0		26,838
Outside Air (cfm/sqft)	0.15					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Sep 12 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



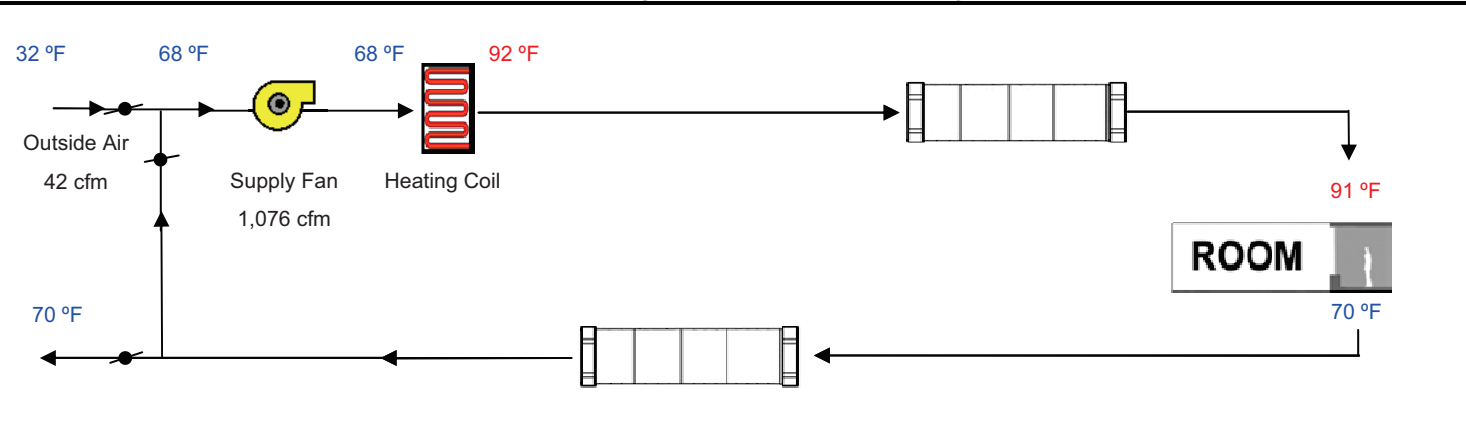
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L1 HP 2	Floor Area 282

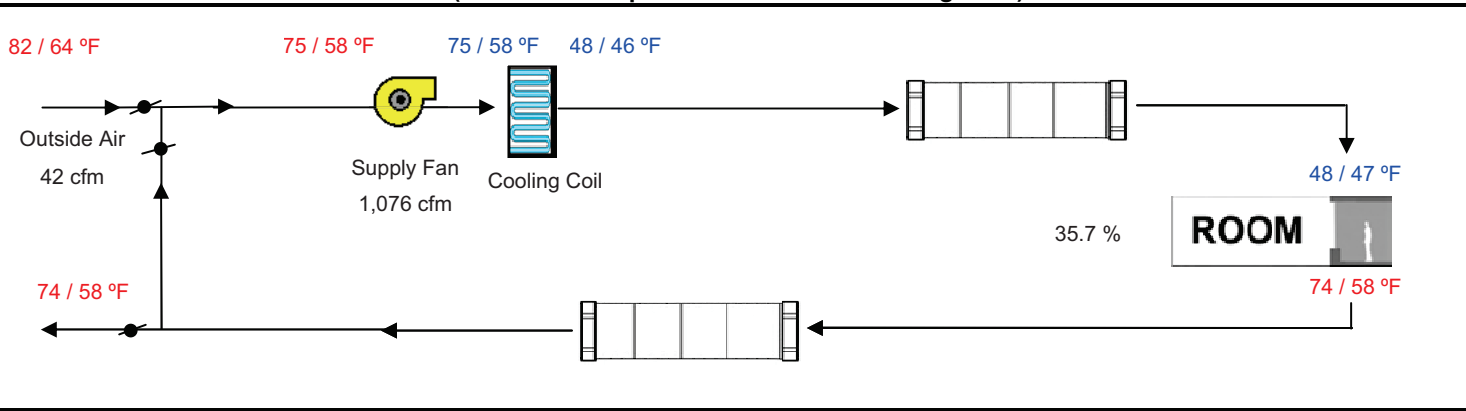
ENGINEERING CHECKS		SYSTEM LOAD						
Number of Systems	1				COIL COOLING PEAK		COIL HTG. PEAK	
Heating System		Total Room Loads	CFM	Sensible	Latent	CFM	Sensible	
Output per System	37,300		276	7,654	705	217	5,030	
Total Output (Btuh)	37,300							
Output (Btuh/sqft)	132.3							
Cooling System			Return Vented Lighting		0			
Output per System	33,600	Return Air Ducts		383		251		
Total Output (Btuh)	33,600	Return Fan		0		0		
Total Output (Tons)	2.8	Ventilation	42	369	470	42	1,726	
Total Output (Btuh/sqft)	119.1	Supply Fan		0		0		
Total Output (sqft/Ton)	100.7	Supply Air Ducts		383			251	
		TOTAL SYSTEM LOAD		8,788	1,175		7,258	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	1,076	HP #2	31,006	0		27,203
Airflow (cfm)	1,076					
Airflow (cfm/sqft)	3.82					
Airflow (cfm/Ton)	384.3					
Outside Air (%)	3.9 %	Total Adjusted System Output (Adjusted for Peak Design conditions)	31,006	0		27,203
Outside Air (cfm/sqft)	0.15					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK		Jun 9 AM		Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



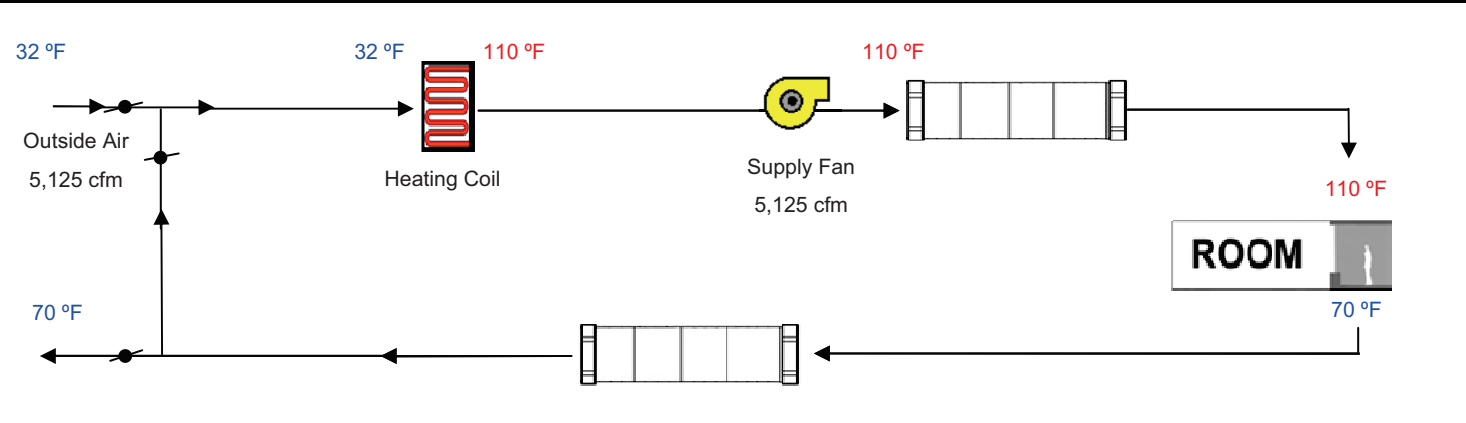
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name MU-1	Floor Area 5,356

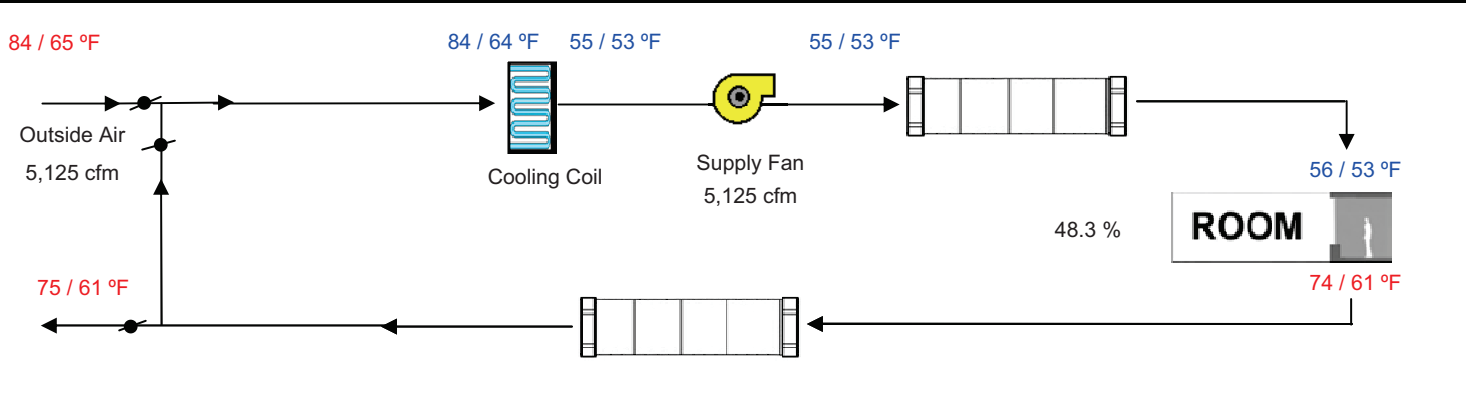
ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	1	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	200,000		3,013	60,054	13,390	466	20,044
Total Output (Btuh)	200,000			0			
Output (Btuh/sqft)	37.3			3,003			1,002
Cooling System				0			0
Output per System	0						
Total Output (Btuh)	0		5,125	52,335	347	5,125	209,281
Total Output (Tons)	0.0			0			0
Total Output (Btuh/sqft)	0.0			3,003			1,002
Total Output (sqft/Ton)	0.0					231,330	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	5,125	MU-1	0	0		200,000
Airflow (cfm)	5,125					
Airflow (cfm/sqft)	0.96					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	100.0 %	Total Adjusted System Output (Adjusted for Peak Design conditions)		0	0	200,000
Outside Air (cfm/sqft)	0.96					
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Jun 5 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



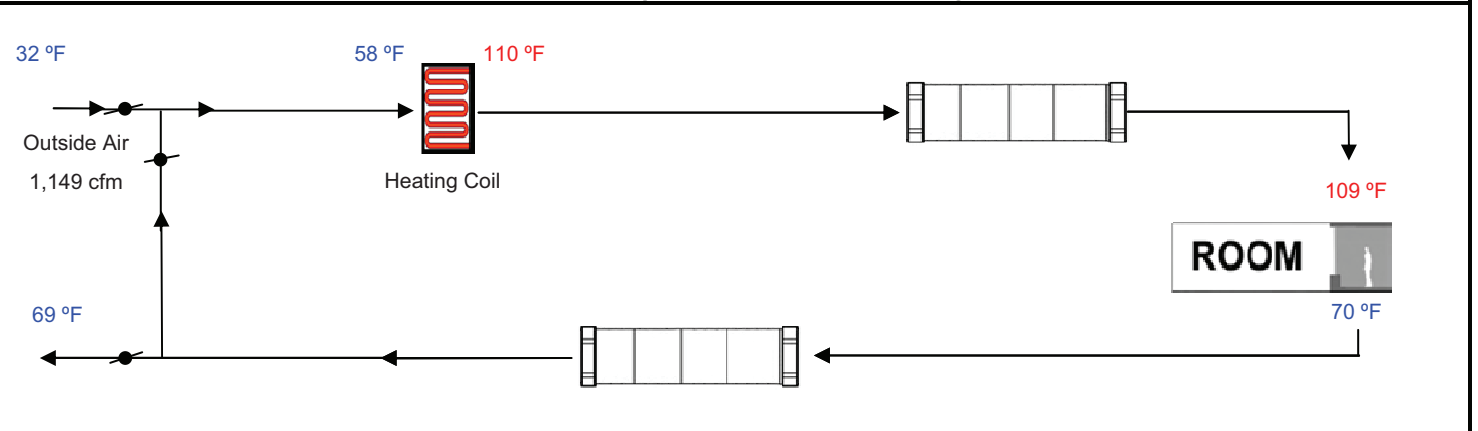
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L2 Wall Heater #201-214	Floor Area 7,662

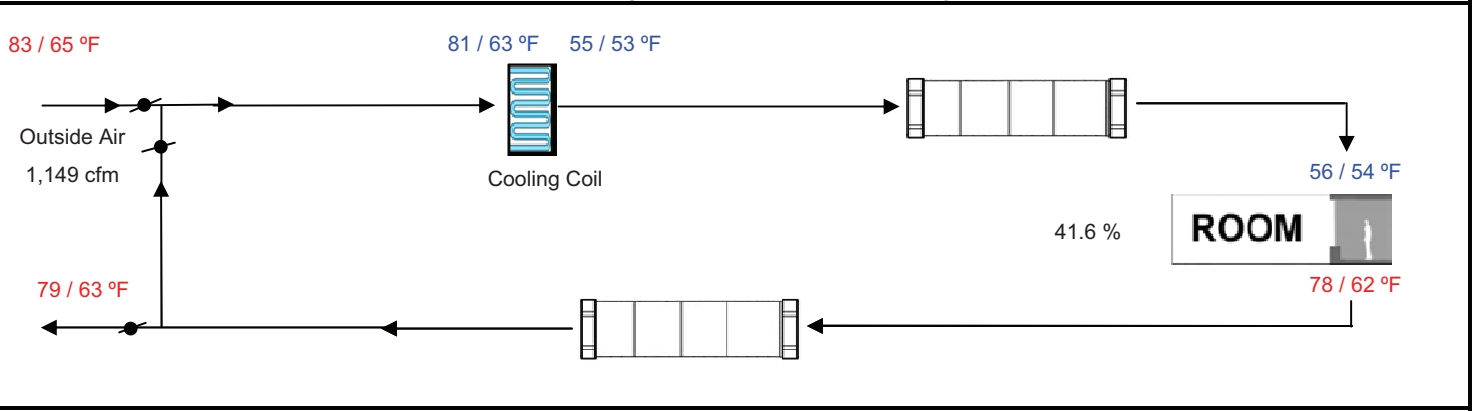
ENGINEERING CHECKS		SYSTEM LOAD						
Number of Systems	28	Total Room Loads			COIL COOLING PEAK		COIL HTG. PEAK	
Heating System					CFM	Sensible	Latent	CFM
Output per System	3,077	5,147	119,771	5,938	1,845	77,820		
Total Output (Btuh)	86,156	Return Vented Lighting			0			
Output (Btuh/sqft)	11.2	Return Air Ducts			5,989		3,891	
Cooling System		Return Fan			0		0	
Output per System	0	Ventilation			1,149	4,905	902	1,149
Total Output (Btuh)	0	Supply Fan			0		0	
Total Output (Tons)	0.0	Supply Air Ducts			5,989		3,891	
Total Output (Btuh/sqft)	0.0	TOTAL SYSTEM LOAD			136,653	6,840	131,592	
Total Output (sqft/Ton)	0.0							

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	0	WH-1/WH-2		0	0	86,156
Airflow (cfm)	0					
Airflow (cfm/sqft)	0.00					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	0.0 %	Total Adjusted System Output		0	0	86,156
Outside Air (cfm/sqft)	0.15	(Adjusted for Peak Design conditions)				
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK		Aug 4 PM		Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



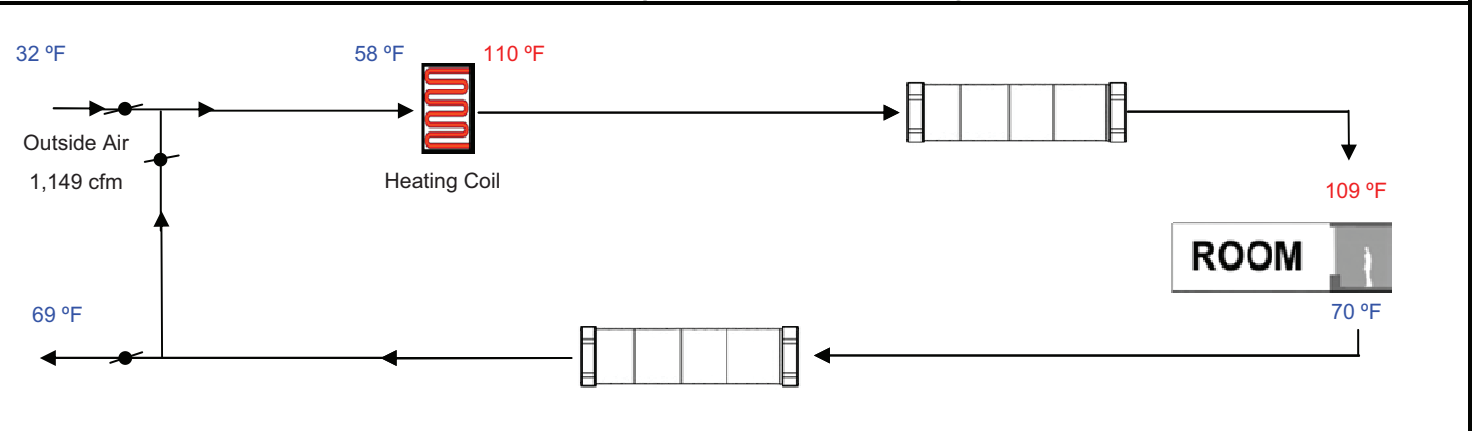
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L3 Wall Heater #301-314	Floor Area 7,662

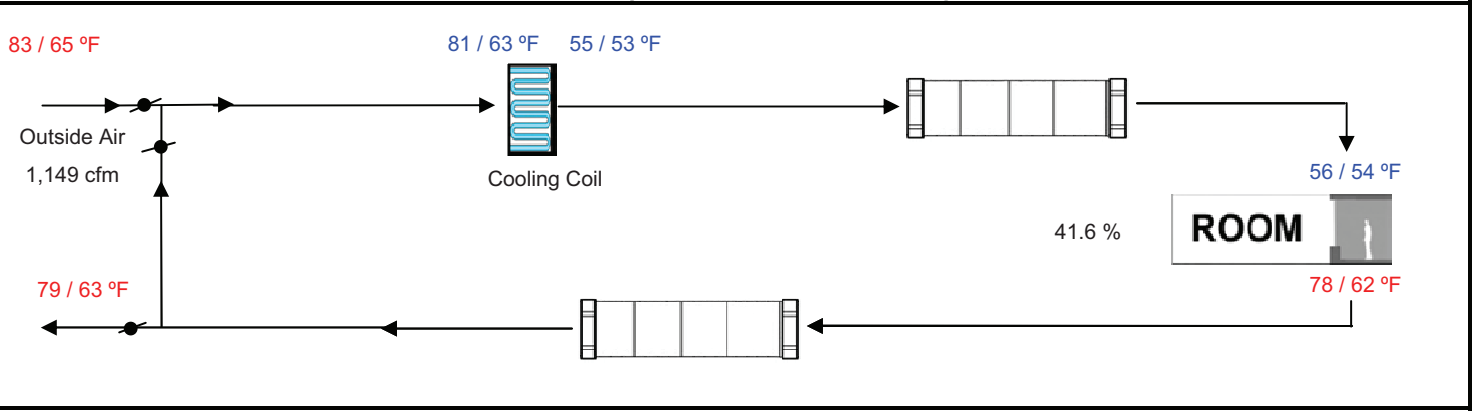
ENGINEERING CHECKS		SYSTEM LOAD						
Number of Systems	28				COIL COOLING PEAK		COIL HTG. PEAK	
Heating System		Total Room Loads	CFM	Sensible	Latent	CFM	Sensible	
Output per System	3,077		5,081	118,329	5,938	1,434	60,797	
Total Output (Btuh)	86,156							
Output (Btuh/sqft)	11.2							
Cooling System			Return Vented Lighting		0			
Output per System	0	Return Air Ducts		5,916			3,040	
Total Output (Btuh)	0	Return Fan		0			0	
Total Output (Tons)	0.0	Ventilation	1,149	4,927	900	1,149	46,247	
Total Output (Btuh/sqft)	0.0	Supply Fan		0			0	
Total Output (sqft/Ton)	0.0	Supply Air Ducts		5,916			3,040	
		TOTAL SYSTEM LOAD		135,089	6,838		113,124	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	0	WH-1/WH-2	0	0		86,156
Airflow (cfm)	0					
Airflow (cfm/sqft)	0.00					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	0.0 %	Total Adjusted System Output	0	0		86,156
Outside Air (cfm/sqft)	0.15	(Adjusted for Peak Design conditions)				
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Aug 4 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

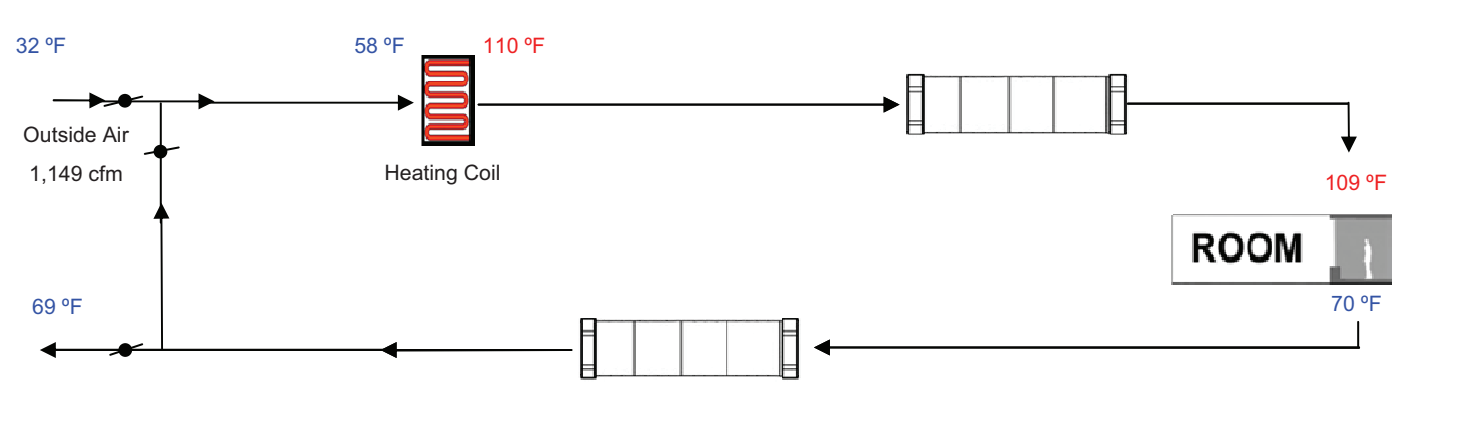
Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L4 Wall Heater #401-414	Floor Area 7,662

ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	28	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	3,077		5,066	118,013	5,938	1,434	60,797
Total Output (Btuh)	86,156			0			
Output (Btuh/sqft)	11.2			5,901			3,040
Cooling System				0			0
Output per System	0		1,149	4,931	899	1,149	46,245
Total Output (Btuh)	0			0			0
Total Output (Tons)	0.0			5,901			3,040
Total Output (Btuh/sqft)	0.0						
Total Output (sqft/Ton)	0.0						
			134,745	6,837		113,122	

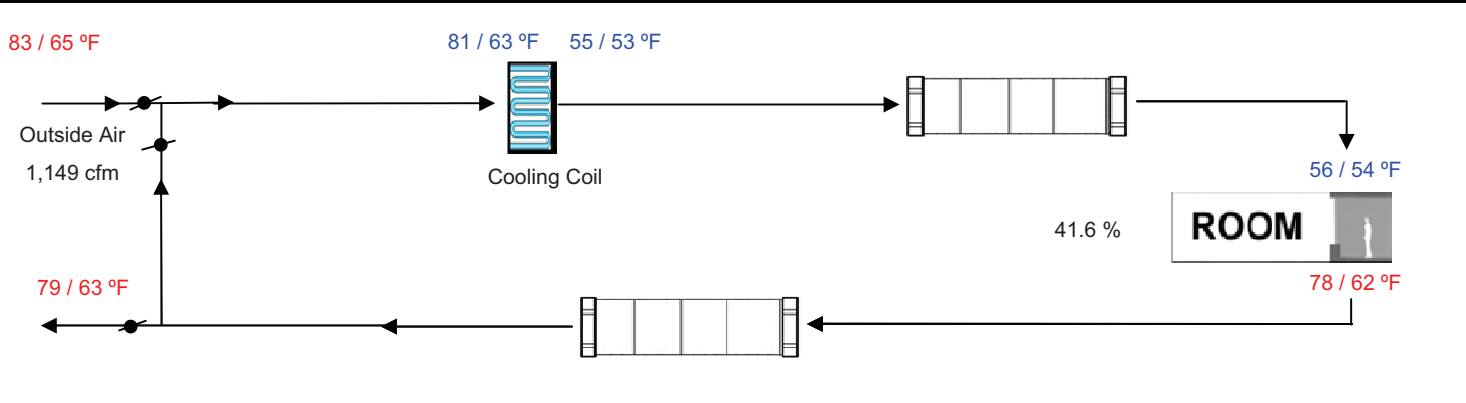
Air System		HVAC EQUIPMENT SELECTION				
CFM per System	0	WH-1/WH-2	0	0		86,156
Airflow (cfm)	0					
Airflow (cfm/sqft)	0.00					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	0.0 %	Total Adjusted System Output (Adjusted for Peak Design conditions)		0	0	86,156
Outside Air (cfm/sqft)	0.15					

Note: values above given at ARI conditions TIME OF SYSTEM PEAK Aug 4 PM Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

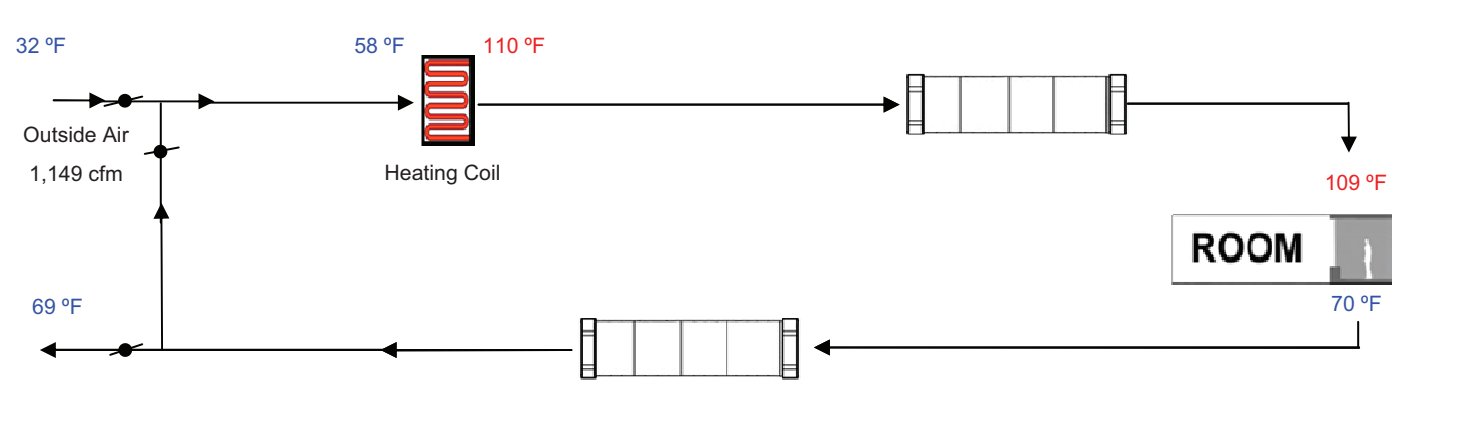
Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L5 Wall Heater #501-514	Floor Area 7,662

ENGINEERING CHECKS		SYSTEM LOAD					
Number of Systems	28	Total Room Loads Return Vented Lighting Return Air Ducts Return Fan Ventilation Supply Fan Supply Air Ducts TOTAL SYSTEM LOAD	COIL COOLING PEAK			COIL HTG. PEAK	
Heating System			CFM	Sensible	Latent	CFM	Sensible
Output per System	3,077		5,066	118,014	5,938	1,434	60,797
Total Output (Btuh)	86,156			0			
Output (Btuh/sqft)	11.2			5,901			3,040
Cooling System				0			0
Output per System	0		1,149	4,931	899	1,149	46,246
Total Output (Btuh)	0			0			0
Total Output (Tons)	0.0			5,901			3,040
Total Output (Btuh/sqft)	0.0						
Total Output (sqft/Ton)	0.0						

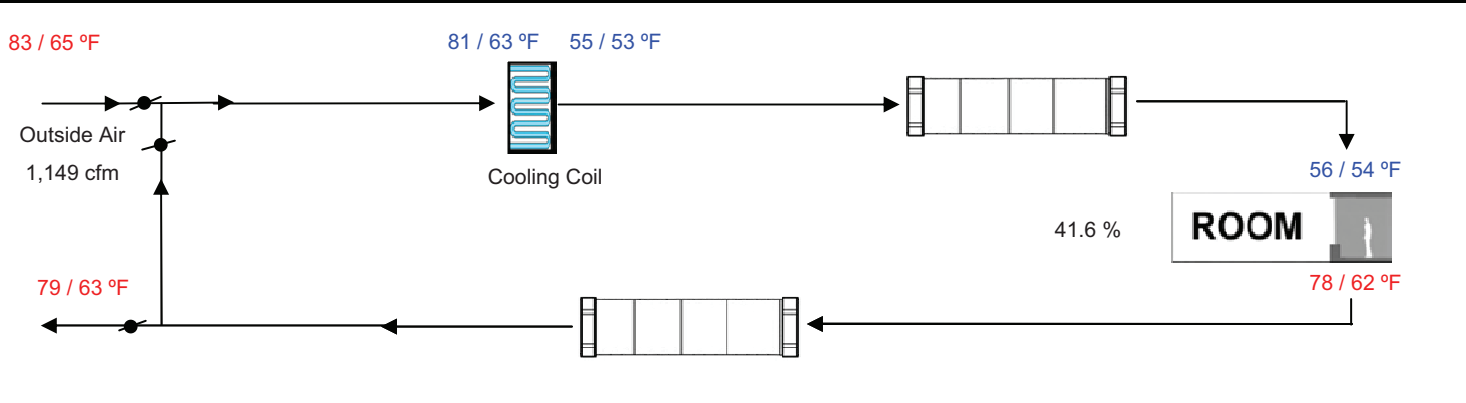
Air System		HVAC EQUIPMENT SELECTION				
CFM per System	0	WH-1/WH-2	0	0		86,156
Airflow (cfm)	0					
Airflow (cfm/sqft)	0.00					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	0.0 %	Total Adjusted System Output (Adjusted for Peak Design conditions)		0	0	86,156
Outside Air (cfm/sqft)	0.15					

Note: values above given at ARI conditions TIME OF SYSTEM PEAK Aug 4 PM Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



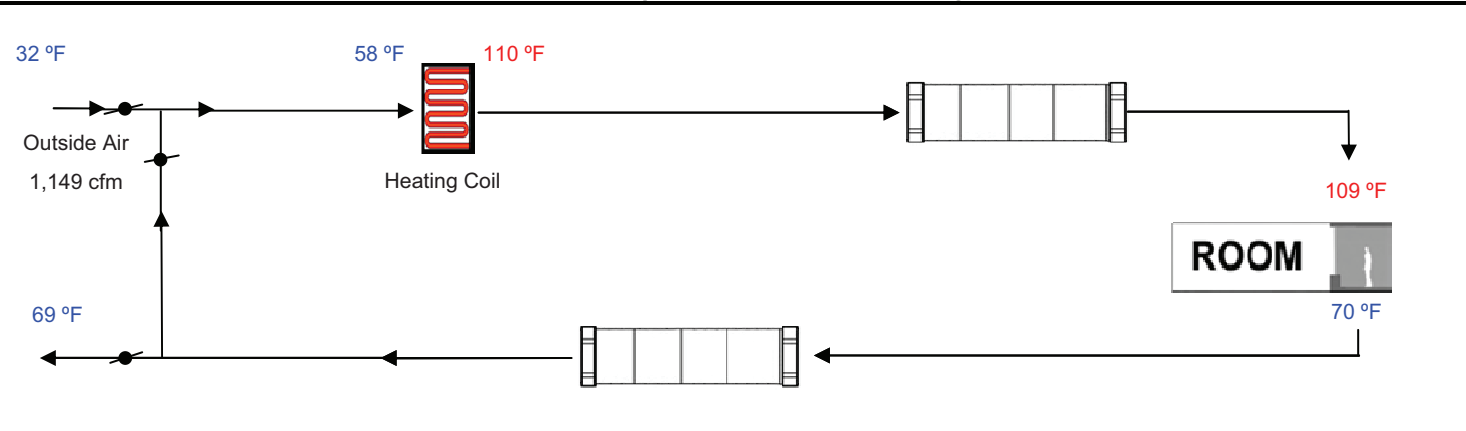
HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

Project Name 6th and Oak Street Apartments	Date 11/12/2010
System Name L6 Wall Heater #601-614	Floor Area 7,662

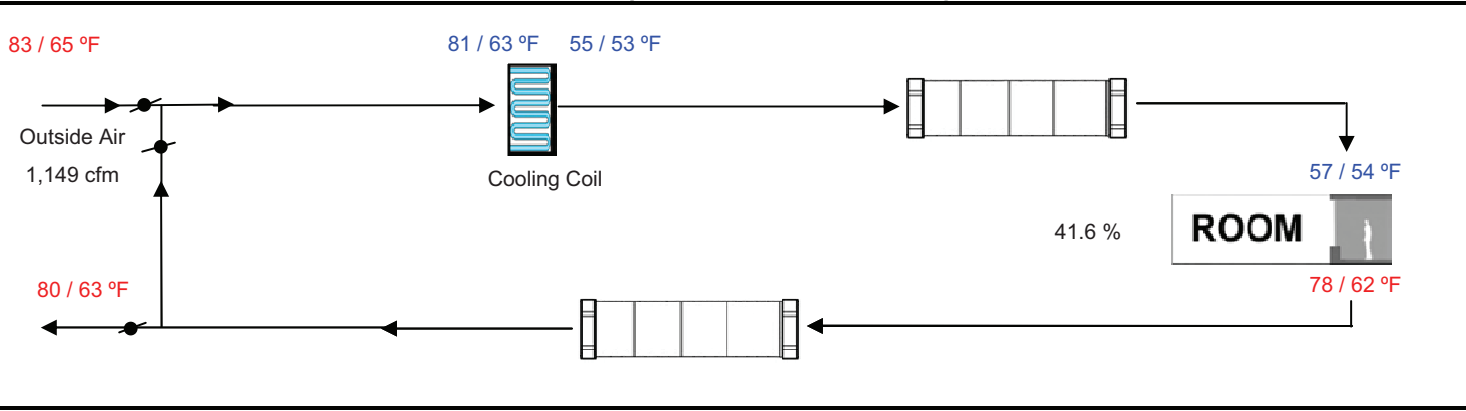
ENGINEERING CHECKS		SYSTEM LOAD						
Number of Systems	28				COIL COOLING PEAK		COIL HTG. PEAK	
Heating System		Total Room Loads	CFM	Sensible	Latent	CFM	Sensible	
Output per System	3,077		5,480	127,012	5,938	1,970	82,960	
Total Output (Btuh)	86,156							
Output (Btuh/sqft)	11.2							
Cooling System			Return Vented Lighting		0			
Output per System	0	Return Air Ducts		6,351		4,148		
Total Output (Btuh)	0	Return Fan		0		0		
Total Output (Tons)	0.0	Ventilation	1,149	4,796	913	1,149	45,912	
Total Output (Btuh/sqft)	0.0	Supply Fan		0		0		
Total Output (sqft/Ton)	0.0	Supply Air Ducts		6,351		4,148		
		TOTAL SYSTEM LOAD		144,509	6,851		137,168	

Air System		HVAC EQUIPMENT SELECTION				
CFM per System	0	WH-1/WH-2	0	0		86,156
Airflow (cfm)	0					
Airflow (cfm/sqft)	0.00					
Airflow (cfm/Ton)	0.0					
Outside Air (%)	0.0 %	Total Adjusted System Output	0	0		86,156
Outside Air (cfm/sqft)	0.15	(Adjusted for Peak Design conditions)				
Note: values above given at ARI conditions		TIME OF SYSTEM PEAK			Jul 4 PM	Jan 1 AM

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



Project Name: **6th and Oak Street Apartments** Date: **11/12/2010**

Step 1 ANNUAL TDV ENERGY USE (kBtu/sqft-yr)			
ENERGY COMPONENT	Standard	Proposed	Margin
Space Heating	18.03	13.47	4.56
Space Cooling	13.48	19.41	-5.93
Indoor Fans	6.74	6.58	0.17
Heat Rejection	5.61	0.00	5.61
Pumps	5.03	2.78	2.25
Domestic Hot Water	23.56	5.60	17.96
Lighting	33.14	34.21	-1.06
Receptacle	30.00	30.00	0.00
Process	0.00	0.00	0.00
Process Lighting	0.00	0.00	0.00
TOTALS:	135.61	112.06	23.55

Step 2 PERCENT BELOW TITLE 24		
Adjusted TDV Energy Use (Excludes Process Energy)		
Standard Design	Proposed Design	Margin
135.61	112.06	= 23.55
Margin	Standard Design	% Below Title 24*
23.55	135.61	= 17.4 %
Incentive Eligibility		
Owner Incentive (>=10%)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Conditioned Floor Area = 46,320.1 ft ² sq. ft.		

Step 3 ANNUAL SITE ENERGY USE			
Average 2pm - 5pm	Standard	Proposed	Margin
Peak Demand (kW)	59.3	63.3	-4.0

The values shown here are based upon the results of an EnergyPro Compliance energy analysis that uses Title 24 profiles as specified in the Alternative Calculation Method manual.

ENERGY COMPONENT	Standard		Proposed		Margin	
	Electricity (kWh)	Natural Gas (therms)	Electricity (kWh)	Natural Gas (therms)	Electricity (kWh)	Natural Gas (therms)
Space Heating	0	4,860	304	3,630	-304	1,230
Space Cooling	22,458	0	33,184	0	-10,726	0
Indoor Fans	15,788	0	15,399	0	389	0
Heat Rejection	12,951	0	0	0	12,951	0
Pumps	12,109	0	6,954	0	5,156	0
Domestic Hot Water	0	6,676	0	1,588	0	5,088
Lighting	82,546	0	84,988	0	-2,442	0
Receptacle	75,884	0	75,884	0	0	0
Process	0	0	0	0	0	0
Process Lighting	0	0	0	0	0	0
TOTALS:	221,737	11,536	216,712	5,217	5,025	6,318

Step 4 POTENTIAL OWNER INCENTIVE CALCULATION

	% Below Title-24* (from step 2)	Incentive Rate	Savings (from Step 3)	Subtotal
Electricity (kWh)	17.4 %	17.4 ¢/kWh	5,025 kWh	\$874
Electricity (kW)		100.00 \$/kW	0.0 kW	\$0
Natural Gas		100.0 ¢/therm	6,318 therm	\$6,318
Owner Incentive				(\$500,000 max) = \$7,192

Potential incentives indicated on this report are available only through the Whole Building Approach Element of the Savings By Design Program for new construction and are NOT GUARANTEED. Projects MUST receive prior, written approval from The Utility during conceptual or early design development and must meet all other program requirements to qualify. Potential incentives are subject to program limitations based upon the incremental cost of the measures.

Project Name: **6th and Oak Street Apartments** Date: **11/12/2010**

Step 1 ANNUAL TDV ENERGY USE (kBtu/sqft-yr)			
ENERGY COMPONENT	Standard	Proposed	Margin
Space Heating	18.03	13.47	4.56
Space Cooling	13.48	19.41	-5.93
Indoor Fans	6.74	6.58	0.17
Heat Rejection	5.61	0.00	5.61
Pumps	5.03	2.78	2.25
Domestic Hot Water	23.56	5.60	17.96
Lighting	33.14	34.21	-1.06
Receptacle	30.00	30.00	0.00
Process	0.00	0.00	0.00
Process Lighting	0.00	0.00	0.00
TOTALS:	135.61	112.06	23.55

Step 2 PERCENT BELOW TITLE 24			
Adjusted TDV Energy Use (Excludes Process Energy)			
Standard Design	Proposed Design	Margin	
135.61	112.06	=	23.55
Margin	Standard Design	% Below Title 24*	
23.55	135.61	=	17.4 %
Incentive Eligibility			Yes No
Design Team Incentive (>=10%)			<input checked="" type="checkbox"/> <input type="checkbox"/>
Conditioned Floor Area =			46,320 sq. ft.

Step 3 ANNUAL SITE ENERGY USE			
Average 2pm - 5pm	Standard	Proposed	Margin
Average 2pm - 5pm	59.3	63.3	-4.0
Peak Demand (kW)			

The values shown here are based upon the results of an EnergyPro Compliance energy analysis that uses Title 24 profiles as specified in the Alternative Calculation Method manual.

ENERGY COMPONENT	Standard		Proposed		Margin	
	Electricity (kWh)	Natural Gas (therms)	Electricity (kWh)	Natural Gas (therms)	Electricity (kWh)	Natural Gas (therms)
Space Heating	0	4,860	304	3,630	-304	1,230
Space Cooling	22,458	0	33,184	0	-10,726	0
Indoor Fans	15,788	0	15,399	0	389	0
Heat Rejection	12,951	0	0	0	12,951	0
Pumps	12,109	0	6,954	0	5,156	0
Domestic Hot Water	0	6,676	0	1,588	0	5,088
Lighting	82,546	0	84,988	0	-2,442	0
Receptacle	75,884	0	75,884	0	0	0
Process	0	0	0	0	0	0
Process Lighting	0	0	0	0	0	0
TOTALS:	221,737	11,536	216,712	5,217	5,025	6,318

Step 4 POTENTIAL DESIGN TEAM INCENTIVE CALCULATION						
	% Below Title-24* (from step 2)	Incentive Rate	Savings (from Step 3)	Subtotal		
Electricity (kWh)	(17.4 % / 3)	5.8 ¢/kWh	5,025 kWh	=	\$291	
Electricity (kW)		33.33 \$/kW	0.0 kW	=	\$0	
Natural Gas		33.3 ¢/therm	6,318 therm	=	\$2,104	
Design Team Incentive				=	(\$50,000 max) = \$2,395	

Potential incentives indicated on this report are available only through the Whole Building Approach-Design Team element of the Savings By Design Program for new construction and are NOT GUARANTEED. Projects MUST receive prior, written approval from The Utility during conceptual or early design development and must meet all other program requirements to qualify. Potential incentives are subject to program limitations based upon the incremental cost of the measures.