

INSTALLATION CERTIFICATE

(PAGE 1 of 4)

CF-OR

50

Site Address _____ Permit Number _____

An installation certificate is required to be posted at the building site or made available for all appropriate inspectors. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-10016).

HVAC SYSTEMS: Heating Equipment

Equip. Type (kg, heat source)	CEE Certified Mfr Name & Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (> 0.75 value)	Duct Location (attic, etc.)	Duct or Piping Number	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

Cooling Equipment

Equip. Type (kg, heat source)	CEE Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (> 0.711 value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date _____

WATER HEATING SYSTEMS:

Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

Heater Type	CEE Certified Mfr Name & Model Number	Distribution Type (Std, Radiator-Use)	If Radiant, Control Type	# of Identical Systems	Rated Input (kW or BTU/hr)	Tank Volume (gallons)	Efficiency (EF, UEF)	Standby Loss (%)	External Insulation R-value
STANDARD	GELSDYOCTG	STRIKE	NA		40000	50	62	3.5	NA

For small gas storage (rated input ≤ 75,000 Btu/hr), electric resistance and heat pump water heaters, Net Energy Factor.
For large gas storage water heaters (rated input > 75,000 Btu/hr), Net Recovery Efficiency, Standby Loss and Rated Input.
For instantaneous gas water heaters, Net Recovery Efficiency and Rated Input.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date _____

Wills
Installing Subcontractor (Co. Name) OR

WILLS PLUMBING
1811 W. EUCLID
STOCKTON, CA 95204

INSTALLATION CERTIFICATE

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CF-6R

Site Address Pelican Point #3

Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. Fixed w/Grd	.33	.34	2	6	70		
2. Fixed no Grd	.33	.37	2	6	82		
3. HS w/Grd	.36	.30	2	7	82		
4. HS no Grd	.36	.33	2	6	235		
5. VS w/Grd	.36	.30	2	1	15		
6. VS no Grd	.36	.33	2	2	15		
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

¹ Manufactured fenestration products use the values from the product label. Field fabricated fenestration products use the default values from Section 116 of the Energy Efficiency Standards.

² Installed U-Factor must be less than or equal to values from CF-1R. Installed SHGC must be less than or equal to values from CF-1R, or a shading device (exterior or overhang) is installed as specified on the CF-1R. Alternatively, installed weighted average U-Factors for the total fenestration area are less than or equal to values from CF-1R.

I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or has a lower U-Factor and lower SHGC than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the *Energy Efficiency Standards* for residential buildings; and 3) the product meets or exceeds the appropriate requirements for manufactured devices (from Part 6), where applicable.

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Item #s
(if applicable)

Bert T. Mall
Signature, Date

Gilwin Company
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

Item #s
(if applicable)

Signature, Date

Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

Item #s
(if applicable)

Signature, Date

Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

COPY TO: Building Department
HERS Provider (if applicable)
Building Owner at Occupancy