



DUCT LEAKAGE TEST REPORT

Residential Prescriptive, Performance or ERI Method Compliance

2020 Florida Building Code, Energy Conservation, 7th Edition

Jurisdiction: _____		Permit #: _____					
Job Information:							
Builder: _____		Community: _____	Lot #: _____				
Address: _____							
City: _____		State: FL	Zip: _____				
Duct Leakage Test Results							
		○ Prescriptive Method	○ Performance/ERI Method				
System 1 _____ cfm25		<p>○ Prescriptive Method cfm 25 (Total)</p> <p>To qualify as “substantially leak free”, Q_n Total must be less than 0.04 if air handler is installed. If air handler unit is not installed, Q_n Total must be less than or equal to 0.03. This testing method meets the requirements in accordance with Section R403.3.3.</p> <p><i>Is the air handler unit installed during testing?</i></p> <p><input type="checkbox"/> YES (=0.04Q_n) <input type="checkbox"/> NO (=0.03Q_n)</p> <hr/> <p>○ Performance/ERI Method cfm25 (Out or Total)</p> <p>To qualify using this method, Q_n must not be greater than the proposed duct leakage Q_n specified on Form R405-2020 or R406-2020.</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Leakage Types select on Form R405-2020 (Energy Calc) or R406-2020</td> <td style="width: 50%; border: none;">Q_n specified on Form R405-2020 (Energy Calc) or R406-2020</td> </tr> <tr> <td style="border: none; text-align: center;"> <input style="width: 100%; height: 20px;" type="text"/> </td> <td style="border: none; text-align: center;"> <input style="width: 100%; height: 20px;" type="text"/> </td> </tr> </table>		Leakage Types select on Form R405-2020 (Energy Calc) or R406-2020	Q_n specified on Form R405-2020 (Energy Calc) or R406-2020	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
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<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>						
System 2 _____ cfm25							
System 3 _____ cfm 25							
Sum of any Others _____ cfm 25							
Total of all _____ cfm 25							
_____ + _____ = _____ Q_n Total of all Systems Total Conditioned Square Footage							
<input type="checkbox"/> PASS <input type="checkbox"/> FAIL							
Duct tightness shall be verified by testing in accordance with ANSI/RESNET/ICC380 by either individuals as defined in Section 553.993(5) or (7), <i>Florida Statutes</i> , or individuals as set forth in Section 489.105(3)(f), (g), or (i) <i>Florida Statutes</i> .							
Testing Company:							
Company Name: _____		Phone: _____					
I hereby verify that the above duct leakage testing results are in accordance with the Florida Building Code requirements with the selected compliance path as stated above, either the Prescriptive Method or the Performance Method.							
Signature of Tester: _____		Date of Test: _____					
Printed Name of Tester: _____							
License/Certification #: _____		Issuing Authority: _____					