

Site Address:	Enforcement Agency:	Permit Number:
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Verified Low Leakage Air Handler (LLAH) with Sealed and Tested Duct System *An additional compliance credit is available for verified low leakage ducts if a Low Leakage Air Handler is installed. The air handler must be connected to a Sealed and Tested New Duct System to receive the credit. Refer to Residential Appendix RA3.1.4.3.10. As many as 4 systems in the dwelling can be documented for compliance using this form. Attach an additional form(s) for any additional systems in the dwelling as applicable.*

System Name or Identification/Tag				
System Location or Area Served				
LLAH Unit Make				
LLAH Unit Model				

- The LLAH must be connected to a New Duct System that meets the HERS verification requirement for Sealed and Tested Ducts in order to receive compliance credit.
- The LLAH cabinet (furnace or heat pump fan and inside coil) must be certified to the Commission to leak 2 percent or less of its nominal air conditioning cfm delivered when pressurized to 1-inch water gauge with all present air inlets, air outlets, and condensate drain port(s) sealed.

If the installed LLAH documentation confirms the unit meets the certification requirement and Duct Testing is specified on the CF-1R, the unit complies. If the unit complies enter Pass				
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DECLARATION STATEMENT

- I certify under penalty of perjury, under the laws of the State of California, the information provided on this form is true and correct.
- I am eligible under Division 3 of the Business and Professions Code to accept responsibility for construction, or an authorized representative of the person responsible for construction (responsible person).
- I certify that the installed features, materials, components, or manufactured devices identified on this certificate (the installation) conforms to all applicable codes and regulations, and the installation is consistent with the plans and specifications approved by the enforcement agency.
- I understand that a HERS rater will check the installation to verify compliance, and that that if such checking identifies defects, I am required to take corrective action at my expense. I understand that Energy Commission and HERS provider representatives will also perform quality assurance checking of installations, including those approved as part of a sample group but not checked by a HERS rater, and if those installations fail to meet the requirements of such quality assurance checking, the required corrective action and additional checking/testing of other installations in that HERS sample group will be performed at my expense.
- I reviewed a copy of the Certificate of Compliance (CF-1R) form approved by the enforcement agency that identifies the specific requirements for the installation. I certify that the requirements detailed on the CF-1R that apply to the installation have been met.
- **I will ensure that a completed, signed copy of this Installation Certificate shall be posted, or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a signed copy of this Installation Certificate is required to be included with the documentation the builder provides to the building owner at occupancy.** I will ensure that all Installation Certificates will come from a HERS provider data registry for multiple orientation alternatives, and beginning October 1, 2010, for all low-rise residential buildings.

Company Name: (Installing Subcontractor or General Contractor or Builder/Owner)		
Responsible Person's Name:	Responsible Person's Signature:	
CSLB License:	Date Signed:	Position With Company (Title):