COMMISSIONING COMPLIANCE CHECKLIST (adapted from the 2024 IECC)

Project Name:

Project Address: Permit Number:

Commissioning Provider (CxP):

Company/CxP Address:

ITEM	COMMISSIONING DOCUMENTATION	APPROVAL
1.	**Project Commissioning Requirements**	
	Project commissioning requirements included in project contract documents.	
2.	**Commissioning Plan**	
	Commissioning Plan with checklists (before start of functional testing) completed. (Section C408.2.1)	
3.	**Commissioning Plan Utilized**	
	Commissioning Plan was used during construction and includes items required in Section 408.2.1	
4.	**Systems Adjusting and Balancing**	
	Systems Adjusting and Balancing completed with report reviewed by CxP	
5.	**HVAC Equipment**	
	HVAC Equipment Functional and Performance Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on	
6.	**HVAC Controls**	
	HVAC Controls Functional and Performance Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on	
7.	**Economizers**	
	Economizer Functional and Performance Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on	
8.	**Lighting Controls**	
	Lighting Controls Functional and Performance Testing has been executed (Section 408.3.1). If applicable, deferred and follow up testing is scheduled to be completed on	
9.	**Service Water Heating**	
	Service Water Heating Functional Testing has been executed. If applicable, deferred and follow up testing is scheduled to be completed on	
10.	**Systems Manual**	
	Project documentation, and Systems and O&M Manual, and training completed or scheduled.	
11.	**Commissioning Report**	
	Preliminary Commissioning Report submitted to Owner and includes all items required in C408.2.4	

Owner/Owner's Representative Acknowledgement

I hereby certify that the commissioning provider has provided me with evidence of mechanical, service water heating and lighting systems commissioning in accordance with the 2024 IECC.

Name/Company: _____

Owner ☐ Owner's Representative ☐

Signature:_____Date:_____

Insert City Seal

City of_____

Residential Energy Compliance Path

Energy Code Requirements of the 2024 IECC (IRC) as amended

Submit with application for either

☐ ***A building permit OR*** ☐ ***A Certificate of Occupancy***

North Central Texas Council of Governments

Project Address:

Project shall comply with one of the following:

- **Option #1 – Prescriptive Compliance: Sections R401 through R404 (N1101 through N1104)**

- **Option #2 – Simulated Building Performance Compliance: Section R405 (N1105)**
  - *Includes compliance with requirements from Sections R401 through R404 as indicated in Table R405.2*

- **Option #3 – IECC Energy Rating Index Compliance: Sections R406 (N1106)**
  - *Includes compliance with requirements from Sections R401 through R404 as indicated in Table R406.2*
    - *Note: The* HERS® *index is not valid for code compliance.*

- **Option #4 – ENERGY STAR Certified Homes® R104.1.1 (N1101.4)**
  - *Includes compliance with requirements from Sections R401 through R404 as indicated in Table R406.2*
  - *Includes compliance with requirements from Section R402.5.1.2 (N1102.5.1.2), R403.3.7 (N1103.3.7), R403.3.8 (N1103.3.8), and R403.6.3 (N1103.6.3).*
    - *Note: Each 1- and 2-family dwelling shall be tested.*

- **Option #5 – HB 3215 (87R) Home Energy Rating System Index Compliance**
  - *Includes compliance with ANSI/RESNET/ICC 301, as it existed on January 1, 2021.*
  - *Includes compliance with the Mandatory requirements of 2018 IECC Section R406.2.*
  - *Includes compliance with Building thermal envelope provision of 2018 IECC R402.1.2 or 2018 IECC R402.1.4.*

Attach appropriate site-specific design compliance report and inspection checklist.

Name and version of the compliance software *(if selecting Option 2 through 5):* _____

I certify that I have verified insulation materials and R-values; fenestration U-factors and SHGC values; area-weighted average U-factor and SHGC calculations; mechanical system design criteria; mechanical and service water heating system and equipment types, mechanical ventilation, sizes and efficiencies; equipment and system controls; duct sealing, duct and piping insulation and location; air sealing details; and that the project as designed satisfies the minimum requirements for the compliance approach selected above.

Agency and Certification Number:_____

Signature of Responsible Party:_____

Printed Name and Title of Responsible Party:

Prepared January 2025, by the Energy and Green Advisory Board of the Regional Codes Coordinating Committee, a committee of the North Central Texas Council of Governments (NCTCOG). https://www.nctcog.org/envir/regional-building-codes/amendments.

Insert City Seal

City of _____

Residential Energy Testing Compliance Certificate

Energy Code Requirements of the 2024 IECC (IRC) as amended

Provide this form at building completion prior to final inspections

North Central Texas Council of Governments

Project Address: _____ Permit Number: _____

BUILDING THERMAL ENVELOPE TESTING VERIFICATION R402.5.1.2 (N1102.5.1.2)

☐ _____ACH50* ☐ _____ CFM per SF of dwelling unit enclosure*

I certify that I have conducted **building thermal envelope air leakage testing and the building thermal envelope has passed the requirements of 2024 International Energy Conservation Code or 2024 International Residential Code, applicable and as amended locally**. I further certify the testing was conducted in accordance with ANSI/RESNET/ICC 380, ASTM E779, ASTM E1827, or ASTM E3158 and that I am a third party as approved by the building official.

Agency and Certification Number:_____

Signature of Responsible Party: _____

Printed Name and Title of Responsible Party:

DUCT SYSTEM LEAKAGE TESTING VERIFICATION R403.3.8 (N1103.3.8)

System #1 - _____**CFM25** **System #2 -** _____ **CFM25** **System #3 -** _____**CFM25**

System #4 - _____**CFM25** **System #5 -** _____ **CFM25** **System #6 -** _____**CFM25**

I certify that I have conducted a **total duct leakage testing and the duct system(s) has passed the requirements of the 2024 International Energy Conservation Code or 2024 International Residential Code, applicable and as amended locally.** I further certify that the testing was conducted in accordance with AMSI/RESNET/ICC 380 or ASTM E1554.

Agency and Certification Number:_____

Signature of Responsible Party: _____

Printed Name and Title of Responsible Party:

MECHANICAL VENTILATION AIRFLOW TESTING VERIFICATION R403.6.3 (N1103.6.3)

Whole-house System #1 -_____ **CFM** **Whole-house System #2 -** _____**CFM**

☐ **The Mechanical Ventilation Fan Efficacy meets the requirements of R403.6.2 and Table R403.6.2**

I certify that I have conducted **whole-house mechanical ventilation airflow testing and the Mechanical Ventilation Systems(s) have passed the requirements of the 2024 International Energy Conservation Code, 2024 International Residential Code or International Mechanical Code as applicable and as amended locally.** I further certify the testing was conducted in accordance with ANSI/RESNET/ICC 380 and that I am a third party as approved by the building official.

Agency and Certification Number:_____

Signature of Responsible Party: _____

Printed Name and Title of Responsible Party:

* Per R402.5.1.3 (1102.5.1.3): The maximum infiltration rate for Option 1 Prescriptive Path is 4.0 ACH in Climate Zone 2 or 3.0 ACH in Climate Zone 3. The maximum infiltration rate for all other compliance paths and climate zones is 4.0 ACH or 0.22 CFM per SF of the building thermal envelope area or the dwelling unit enclosure area, as applicable.

Prepared January 2025, by the Energy and Green Advisory Board of the Regional Codes Coordinating Committee, a committee of the North Central Texas Council of Governments (NCTCOG). https://www.nctcog.org/envir/regional-building-codes/amendments.