

# Fort Collins Residential Energy Code

## AIR SEALING DISCLOSURE FORM

airdisc2.xls -- 7/10/98

(Not applicable to E-STAR or ENERGY SCORE rated homes)

## Neighborhood & Building Services

281 N. College Ave., P.O. Box 580, Fort Collins, CO 80522  
Phone: 970 221 6760 FAX: 970 224 6134

Job address: \_\_\_\_\_

General contractor: \_\_\_\_\_

Air sealing contractor: \_\_\_\_\_

### INSTRUCTIONS

Complete either Part A or Part B

Part A is to be signed by the air sealing contractor or representative of the general contractor.

Part B is to be signed by the blower door testing contractor or representative of the general contractor.

The "Blower Door Test Report" or equivalent documentation must be attached.

Please type or print, except for the signature.

If components vary, make multiple entries to describe them.

One copy of this form must be provided to the Building and Zoning Department prior to C. O.

One copy of this form must be provided to the original home buyer.

### A. Prescriptive path (Air Sealing Checklist)

I/We certify that the air sealing requirements specified in the current City of Fort Collins Residential Energy Code have been completed in this building, in accordance with the "Air Sealing Checklist" published by the City of Fort Collins.

Person Certifying Job: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Business Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

### B. Performance path (Blower Door Test)

I/We certify that this building has met the air leakage performance threshold specified in the current Fort Collins Residential Energy Code, in accordance with the "Blower Door Test Procedures" published by the City of Fort Collins.

Testing contractor: \_\_\_\_\_

Date of test: \_\_\_\_\_

CFM50: \_\_\_\_\_

Air flow through the blower door at 50 Pascals pressure difference (cfm)

Volume: \_\_\_\_\_

Volume of home (cu. ft.)

ACH50: \_\_\_\_\_

Air change rate per hour at 50 Pascals pressure difference

$ACH50 = (CFM50 \times 60) / \text{Volume}$

The performance threshold for code compliance is ACH50 not exceeding 5.0 ac/h

Person Certifying Job: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Business Firm: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_