

# Northshore Envelope Leakage Test Report (Blower Door Test)

Permit #:

## Job Information

Builder:	Community:	Lot:
Address:		Unit
City:	State:	Zip:

## Air Leakage Test Results *Passing results must be no more than 7 ACH(50) or less than 3 ACH (50)*

$$\frac{\text{CFM}(50)}{\text{Building Volume}} \times 60 = \text{ACH}(50)$$

**PASS**       **FAIL**

- Method for calculating building volume:
- Retrieved from architectural plans
  - Code software calculated
  - Field measured and calculated

When ACH(50) is less than 3, Mechanical Ventilation installation must be verified by building department.

## Certification of Test Results

**Testing.** The building or dwelling unit shall be tested and verified as having an air leakage rate of not exceeding 7 air changes per hour in Climate Zones 2, or below 3 air changes per hour. Testing shall be conducted with a blower door at a pressure of 0.2 inches w.g. (50 Pascals).

## Testing Company

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby verify that the above Air Leakage results are in accordance with the LSUCCC Energy Conservation requirements.

Date of Test: \_\_\_\_\_

Signature of Tester: \_\_\_\_\_

Printed Name of Tester: \_\_\_\_\_

License/Certification #: \_\_\_\_\_ Issuing Authority: \_\_\_\_\_