

Designer/Architect/Engineer's Letter of Energy Review

(Date)

Referenced Project: (Project Name)
 (Project Address)
 Project permit number if known

The project referenced above is being designed under the commercial provisions of the 2015 IECC or ASHRAE 90.1-2013. In accordance to **Name/number of your commercial energy policy informational bulletin**, we have reviewed the design of this project for the following energy related items. It is our opinion that the items checked below, as designed, meets the substantial intent of the 2015 IECC or ASHRAE 90.1-2013. Items not checked will be provided to the City of **City name here** for their review with application submittal for a building permit.

Code Section ^a	Reference ^b	Checked		Not Required
		Yes	No	
Insulation materials/Assemblies and their R-values/U-Factor or Component Performance (calculations)	C402.1, C402.2, 5.5.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof Solar Reflectance and Thermal Emittance	C402.3, 5.5.3.1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fenestration U-factors and solar heat gain coefficients (SHGCs), Percentage of vertical fenestration to wall area, and percent skylights to roof area	C402.4, 5.5.4.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Area-weighted U-factor and SHGC calculations, Area weighted calculations, details of dynamic glazing, Calculations for fenestration orientation (ASHRAE)	C402.4.3, 5.5.4.6, 5.5.4.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Barrier – materials and assemblies compliance	C402.5.1.2, 5.4.3.1.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical system design criteria - Calculations for Sizing Equipment	C403.2.2, 6.4.2.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical and service water heating system and equipment types, sizes and efficiencies	C403.2.3, C404.2, 6.4.1.1, 7.4.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calculations for Maximum Hot Water Volume or Length (IECC)	C404.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Efficiency rating of all refrigeration and freezer equipment	C403.2.14, 6.4.1.1	—	—	—
Economizer fault detection and diagnosis	C403.2.4.7	—	—	—
Fan motor horsepower (hp) and controls efficiencies	C403.2.12, 6.5.3.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC duct and plenum sealing, and insulation details, Hot Water Piping fluid temperatures and insulation	C403.2.9, C404.4, 6.4.4.1.2-3			
Lighting fixtures – Calculations for total connected interior and exterior power	C405.4.1, C405.5.1, 9.2.2.3, 9.4.2			
Calculations for interior lighting power by the building area method or the space by space method	C405.5.1, 9.2.2, 9.5, 9.6	—	—	—

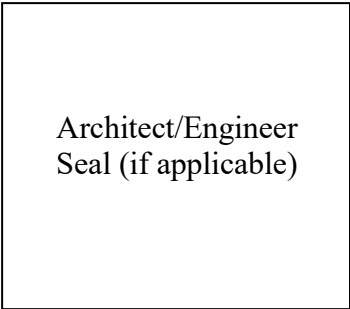
Notes

- a. Some code sections may not be applicable dependent on the chosen compliance path
- b. Code References: Cxxx.x refers to an 2015 IECC section; while 5.x.x, 6.x.x etc, refer to a section in ASHRAE90.1-2013

If you have any questions, please call.

Respectfully,

[Designer/Architect/Engineer Signature Here]
 (Type Architect/Engineer Name Here)



Provide on Firm Letterhead or Provide Contact Information:

Name: _____

Firm/Company name: _____

Address: _____

E-Mail: _____

Phone: _____

2015 Commercial Energy Compliance System Letter(s)

Your Name: _____

Company Name: _____

Address: _____

Phone: _____ Email Address: _____

Project Permit Number(s): _____

Project Address: _____

Building Number(s): _____

Suite Number: _____

The following Energy Conservation Letters section may be filled out by the Architect, Engineer, General Contractor, Installer, Commissioning Agent or Owner's Agent. Other Approved entities?

The following checked items/systems were installed and installation verified on _____ (date).

This Energy Compliance System Letter being submitted consisted of the following energy verifications. *(Check each that you are confirming)*

Energy Conservation Letters

Building Thermal Envelope – Insulation

- Wall Insulation R-Values
- Ceiling Insulation R-values
- Air Barrier

Building Thermal Envelope - Roof Reflectance

- Roof Solar Reflectance & Thermal Emittance

Building Thermal Envelope – Windows

- Fenestration U-factors SHGC, and VT
- Minimum and Maximum Skylights

Plumbing – Service Hot Water Systems

- Water Heating Equipment Efficiencies
- Hot Water Piping Insulation
- Controls for Hot Water Recirculation

Mechanical Systems

- Minimum Equipment Efficiencies
- HVAC System Controls
- Duct Insulation and Sealing
- Energy Recovery System
- Kitchen Exhaust System
- Demand Controlled Ventilation
- Fan Efficiencies
- Economizers
- Walk-in Coolers Freezers/Refrigeration

Electrical Systems (Required)

- Occupant Sensors (installed per plan)
- Time Switch Controls (installed per plan)
- Daylight Responsive Controls (installed per plan)
- Electric Motor/Transformer Efficiencies

(Fill out and submit the next page providing details of the installation)

2015 Commercial Energy Compliance System Letter(s)

Provide the following information: (provide detail(s) of the installation based on which energy system is being submitted) - Provide on a separate sheet as needed) Place "N/A" for items that do not apply to this Energy Compliance System Letter being submitted.

R Values or U-Factors of the Roof system/Ceiling _____

R Values or U-Factors of the Exterior Envelope Walls _____

R Values or U-Factors of Floor if applicable _____

Roof Solar Reflectance / Thermal Emittance _____

Fenestration – Vertical Window and Skylights U-Factors, Solar Heat Gain Coefficients, and Vertical Transmittance

Insulation R Values of Mechanical ducts _____

Insulation R Values of Plenum _____

Insulation R Values of Plumbing Hot water piping systems _____

Mechanical Equipment Efficiencies (in units as appropriate to the particular equipment) _____

Plumbing Hot Water Equipment Efficiencies (in units as appropriate to the particular equipment) _____

COMPLIANCE STATEMENT:

By checking this box, I am confirming that at the time of this inspection all items checked and noted above were installed, and/or inspected in accordance with the 2015 International Energy Conservation Code. I am affirming that this project is consistent with the City approved plans and the Energy Compliance Path chosen during design and permitting.

Email form to **EMAIL ADDRESS HERE**

Date: _____

Name (Print): _____

Title/Designation: _____

Name (Signature): _____

2015 Commercial – Preliminary Commissioning / Testing Reports

The following Pre-Commissioning Statement may be filled out by the registered design professional, or approved Certified Commissioning Agent

Pre-Commissioning Report & Testing Reports, Including High Pressure Ducts and/or Air Barrier (attach testing results/report(s) with this form)

(check which Pre-Commissioning and/or Testing Report is being submitted to fulfill inspection requirements of this project – Check any that apply to this submittal) (code sections reference the 2015 IECC)

Commissioning Mechanical System Controls

System Adjusting and Balancing C408.2.2

Functional Performance Testing, Equipment Controls and Economizers C408.2.3

Commissioning Hot Water Recirculation Controls C408.2.3.2

Commissioning Lighting Controls C408.3

Occupant Sensor Controls

Time Switch Controls

Daylight Responsive Controls

Duct Leakage Testing for High Pressure Ducts if applicable C403.2.9.1.3

Building Pressure Testing of the Air Barrier (if required by the Architect)

C402.5.2

COMPLIANCE STATEMENT:

Qualified individuals from this office visited the site to perform the Pre-Commissioning and/or Duct/Air Barrier Testing checked above for general conformance with the previously submitted Commissioning Plan, Architect/Engineer's design and requirements of the 2015 International Energy Conservation Code.

In my opinion, based on our experience, knowledge, information and belief, the Pre-Commissioning and/or Testing Report(s) submitted accurately reflects the testing of controls or systems checked above.

Email form and report(s) to **EMAIL ADDRESS HERE**

Date: _____

Name (Print): _____

Title/Designation: _____

Name (Signature): _____

Professional License or Commissioning Certification Number: _____