INSTALLATION CERTIFICATE Verification of High FFP Equipment (Page 1 of 1)								
Verification of High EER Equipment Site Address:				Enforcement Agency:		Permit Number	(Page 1 of 1) Permit Number:	
Site A	aut css.			Linor	ement Agency.	T CI IIII I (UIII)CI	. •	
Verification of High EER Equipment Procedures for verification of High EER Equipment are described in Reference Residential Appendix RA3.4. For dwelling units with multiple systems, the procedures must be applied to each system separately. 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.								
1	System Name or Identification/	Гад						
2	System Location or Area Serve	d						
3	Certified EER Rating of the instequipment (Btu/Watt-hr)	talled						
4	Make and Model Number of the Outdoor Unit	einstalled						
5	Make and Model Number of the Inside Coil	einstalled						
6	Make and Model Number of the Furnace or Air Handler.	einstalled						
7	Minimum Equipment EER requirement compliance as reported on the C	CF-1R						
 □ When a high EER system specification includes a time delay relay, the installation of the time delay relay must be verified for compliance credit. Refer to Reference Residential Appendix RA3.4.3 for the Time Delay Relay Verification Procedure. □ When installation of specific matched equipment is necessary to achieve a high EER, installation of the specific equipment must be verified for compliance credit. Refer to Reference Residential Appendix RA3.4.3 for the Matched Equipment Verification Procedure. 								
8	If the Certified EER Rating in requal to or greater than the requirement minimum EER in row 7, the uncomplies. If the unit complies en	ired it						
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:		Positio	n With Company (Tit	le):		