

IECC 115 AA Stretch Code Compliance Sheet

Completely fill out all information that applies, omissions will cause denial of application.

Contractors Name: _____ Permit Applicant Name (If Different) _____
Applicant Phone # _____ Job Site Address _____

**This form is for when the prescriptive option for energy code compliance is chosen.
For Performance Option, this form is not needed; instead provide the projected
HERS rating from the Accredited HERS Rater that you hire.**

1. Alteration, Renovation or Repair Prescriptive Compliance Option

Please check what option that you are choosing for your project:

Alteration, Renovation or Repair (Prescriptive)

Building Permit Submittal :

Prescriptive (IECC Table 402.1.1)

ResCheck- ***UA Alternative only***

Building Envelope Air Tightness & Insulation

Installation Option :

Visual Inspection Option

Door Blower Test (Results Required For Final Inspection)

When existing conditions apply and exception 3 in 101.4.3 is being followed complete the following:

Wall - Existing cavity depth _____ inches x R value of 3.5 per inch = _____ R value

Ceiling - Existing cavity depth _____ inches x R value of 3.5 per inch = _____ R value

Floor - Existing cavity depth _____ inches x R value of 3.5 per inch = _____ R value

Roof - Existing cavity depth _____ inches x R value of 3.5 per inch = _____ R value

In addition compliance with the Energy Star Qualified Homes Thermal Bypass Inspection Checklist will be required for prescriptive compliance.

<http://www.energystar.gov>

New & Replacement Doors, Windows and Skylites Need to Comply with Program Requirements for Residential Windows, Doors, and Skylights – Version 5.0.

WINDOWS	DOORS OPAQUE	DOORS $\leq \frac{1}{2}$ Lite	DOORS $\geq \frac{1}{2}$ Lite	SKYLITE
# of Windows _____	# of Doors _____	# of Doors _____	# of Doors _____	# of Skylights _____
U-Factor _____	U-Factor _____	U-Factor _____	U-Factor _____	U-Factor _____
SHGC _____	SHGC _____	SHGC _____	SHGC _____	SHGC _____

Note: Please have window stickers or factory affidavit on site for inspection for compliance with U-Factor and Solar Heat Gain Coefficient (SHGC) requirements.

See Next Page For Additions, Roof Covering and Exterior Side Wall Covering and Ducts

To save Paper please turn this sheet over to print one page double sided.

1. Additions Prescriptive Compliance Option

Please check what options that you are choosing for your project:

Residential Addition (Prescriptive)

Building Permit Submittal :

Prescriptive (IECC Table 402.1.1)

ResCheck- **UA Alternative only**

Building Envelope Air Tightness & Insulation Installation Option :

Visual Inspection Option

Door Blower Test (Results Required For Final Inspection)

In addition compliance with the Energy Star Qualified Homes Thermal Bypass Inspection Checklist will be required for prescriptive compliance.

<http://www.energystar.gov>

2. For Re-Roofing and Re-Siding Sheathing Exposure

Please check what applies

Will the wall sheathing be exposed? YES NO (If no please certify by signing below, if yes please answer the next question)

Will the roof sheathing be exposed? YES NO (If no please certify by signing below, if yes please answer the next question)

Is the space above or below the sheathing insulated? YES NO (If yes please certify by signing below, if no please certify that either exception 3 will be met or the prescriptive R-value in the current IECC will be met.)

For Exception # 3, I certify that insulation with an R-Value of 3.5 per inch or more will be installed and that an inspection will be obtained before covering.

Contractor Name _____ Contractor Signature _____ Date _____

Note: It is not the intention to expose roofs or walls to the weather, for unique situations please communicate with the Building Inspector.

Compliance Statement: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the current IECC and [Stretch Code Amendment](#).

Contractor _____ Signature _____ Date _____