



# HOME FREE NEVADA

## Post-Installation Tests and Inspections

### Homeowner Information

Name: \_\_\_\_\_ Tracking Number: \_\_\_\_\_

Energy Assessor: \_\_\_\_\_ Partner: \_\_\_\_\_

Test-out Date: \_\_\_\_\_

### Blower Door Test/Ventilation Compliance

Method Used to Determine Building Leakage Standard: \_\_\_\_\_

Building Leakage (Test in) \_\_\_\_\_ (Test Out) \_\_\_\_\_

Pass                  Pass with Ventilation Recommended                  Fail

Action Required: \_\_\_\_\_

Airflow Test Result \_\_\_\_\_ Pass                  Fail

Action Required: \_\_\_\_\_

Duct Leakage Test: \_\_\_\_\_

Duct Test Result (or attach): \_\_\_\_\_

Pressure Pan Average (Test in) \_\_\_\_\_ (Test Out) \_\_\_\_\_

Action Required:

## Combustion Appliance Zone Tests

### Worst Case Test Results

	Spillage	Draft	CO
Heating System	Pass	_____pa	_____ppm
Domestic Hot Water System	Pass	_____pa	_____ppm
Other	Pass	_____pa	_____ppm

Action Required:

### Natural Condition Test Results

	Spillage	Draft	CO
Heating System	Pass	_____pa	_____ppm
Domestic Hot Water System	Pass	_____pa	_____ppm
Other	Pass	_____pa	_____ppm

Action Required:

### CAZ Tests

	CO Ambient	Base Pressure	Worst Case Pressure	Net CAZ Depress.	CAZ Limit	Vent	Temp (°F)	Confined Space
CAZ 1:	_____	_____	_____	_____	_____	Pass	_____	
CAZ 2:	_____	_____	_____	_____	_____	Pass	_____	

Action Required:

### Gas Leakage

Test: No Leaks                      Leaks Detected as Noted \_\_\_\_\_

### Carbon Monoxide

	Kitchen	Main Living	Other ppm
Ambient CO	_____	_____	_____
Oven CO	_____	_____	_____

Action Required:

Other

Dryer Vent:    Electric                      Gas Properly Vented                      Gas Improperly Vented

Action Required: \_\_\_\_\_

Other Tests/Notes:

**Photographs of Upgraded Conditions** Please add photos of upgraded ECMs:

**Homeowner and Partner Statement and Signature**

I attest that all of the information above is correct and to the best of my knowledge.

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

I attest that I am the owner of the property specified above and that all materials and equipment included in my retrofit were furnished and installed by the HomeFree Nevada Partner, and that work has been completed pursuant to the Scope of Work.

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