

App. Approved _____

Date Authorized Official

App. Disapproved _____

Date Authorized Official

Plumbing Permit Number _____

Electrical Work Order Number _____

Board Approval _____
Date Case # _____

TOWN OF CLAY

4401 Route 31, Clay, NY 13041

(315) 652-3800

RESIDENTIAL ADDITION PERMIT APPLICATION

Department of Code Enforcement

Permit Number _____

Date Filed _____

Tax Map Number _____ - _____ - _____

Applicant – do not write above this line

Visit us online at: www.townofclayny.gov

ADDITION SIZE:

_____ (Length) X _____ (Width)

_____ (Height) _____ (Sq. FEET)

_____ (Bathrooms)

Building Permit Fees. Where the TOTAL VALUATION of the work is:

\$1 - \$1000..... \$25.00

For each additional \$1,000.00 or fraction thereof..... \$ 6.00

Property Information

Address or Tract/Lot _____
Zip _____

Zoning District _____

Owner Information - PLEASE PRINT

Property Owner _____

Owner's Address

City _____ Zip _____

Owner's Phone No.(H) _____ **(W)** _____

Email: _____

Owner's Signature: _____

Total Value: \$ _____

Permit Fee: \$ _____ **(cash or check only)**

Project Description _____ Description of Proposed Development or Intended Use _____

Approved Plan Reference:

Architect or Engineer _____ Phone _____

Company _____ Plan Date (Original) _____

Plan Title _____ Last Revision _____

Applicant Information: (if different from owner)

X _____ is the _____
(Name of individual signing application) _____ (agent, contractor, corporate officer, etc.)

X _____ Zip _____
(Address) _____ (City) _____ (State) _____

Phone _____
(Signature) _____

APPLICATION IS HEREBY MADE to the commissioner for the issuance of a Building Permit pursuant to the New York State Uniform Fire Prevention and Building Code for the construction of buildings, additions or alterations, or for removal or demolition, as herein described. The applicant agrees to comply with all applicable laws, ordinances and regulations.

Contractor Information:

Name of Contractor _____ Site Contact Person _____ Phone _____

Address _____ State _____ Zip _____

Contractors Liability Insurance : _____ ATTACHED, OR _____ ON FILE

Workers' Compensation Insurance and Disability Insurance: _____ ATTACHED, OR _____ ON FILE

Please attach separate drawing (survey) showing clearly and distinctly all buildings, whether existing or proposed, and indicate all set-back dimensions from property lines.

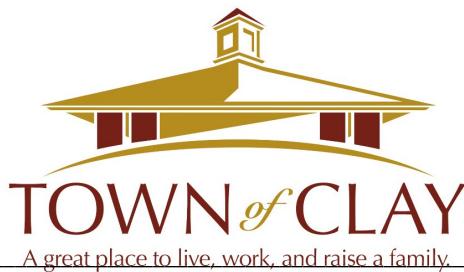
RESIDENTIAL ADDITION REQUIREMENTS:

1. APPLICATION
2. SURVEY
3. STAMPED ARCHITECTURAL OR ENGINEERS DRAWINGS
4. CONTRACTORS INSURANCE, LIABILITY AND WORKERS COMP
5. IF DOING WORK YOURSELF MUST HAVE A CE-200 FORM. SEE DIRECTIONS BELOW:
 - Go to 'townofclayny.gov'
 - Next- go to 'Planning & Development'
 - Next- go to 'Forms, Permits, & Info'
 - Next- Click on 'Certificate of Attestation of Exemption' (CE-200) and click on the link.
 - Please print your certificate and bring it in with your application.
6. PERMIT FEE ACCORDING TO COST OF CONSTRUCTION

WE WILL BE INSPECTING:

1. FOOTER
2. FOUNDATION
3. FRAMING
4. AIR SEALING
5. FIRE SEALING
6. INSULATION
7. ELECTRICAL
8. PLUMBING (IF NEEDED)
9. FINAL INSPECTION

Department of Code Enforcement



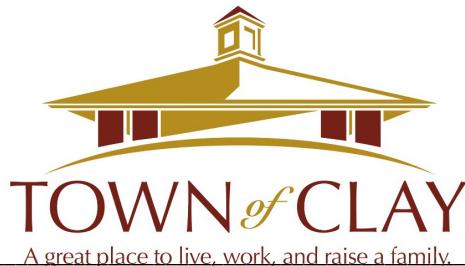
4401 State Route 31
Clay, New York 13041-8707
Website: www.townofclayny.gov

Phone: (315) 652-3800
Fax: (315) 622-7259
E-mail: codes@townofclayny.gov

PROCEDURES FOR OBTAINING RESIDENTIAL BUILDING PERMITS FOR ADDITIONS, ALTERATIONS, GARAGES, SHEDS AND DECKS

1. Completed permit application and check or cash to pay fee.
2. Plot on property survey showing where your structure is located on your property.
3. Setbacks must be met as required by the zoning of your property. Anything closer to the property lines are in violation of the Town of Clay Zoning Ordinance. **You cannot build any structure on an easement.** (Width of easements take precedence over normal setbacks.) For properties that are designated in a floodplain, additional requirements of Chapter 112 must be met.
Accessory buildings (e.g., storage units, sheds, etc.) for one- or two-family dwellings or townhouses in residential districts that are **100 square feet or less in area and less than 12 feet in height do not need a building permit** or certificate of occupancy from the Town of Clay. However, these accessory buildings shall comply with the following minimum standards:
 - a. Not located within any easement or right-of-way.
 - b. Located in the portion of a lot behind a line formed by the front wall of the principal building.
 - c. Located in compliance with any applicable corner lot requirements
 - d. **Minimum setback of three feet (3') from any Property line, Principle Building or other Accessory Structure**
4. 2 Sets of plans or drawings showing what you are building, materials that you are using and HOW it will be constructed. Stamped and signed architectural print may be required
5. Contractors must submit a Certificate of Liability, Workers Compensation and Disability Benefits Insurance Coverage.
6. Permit will be mailed to you or can be picked up at our office. Office hours are 8:30 to 4:30pm. **Permits will be accepted until 4:00pm.** Permits will be issued usually within 5 business days depending on the number of applications at any given time and once all information has been approved.
7. Upon issuance of your building permit, please contact the authorized official for the necessary inspections to be made during the course of construction. **Inspections require a 48 hour notice.**

Department of Code Enforcement



4401 State Route 31
Clay, New York 13041-8707
Website:
www.townofclayny.gov

Phone: (315) 652-3800
Fax: (315) 622-7259
E-mail: Codes@townofclay.org

PROCEDURES FOR OBTAINING A NEW PRESIDENTIAL HOME OR ADDITION BUILDING PERMIT

- 1. Permit Application
- 2. 2 Sets of Stamped Architectural Drawings, one set of 11x17 drawings, and an electronic file.
- 3. Driveway Permit Town Road County Road
- 4. Truss Certifications
- 5. Survey Showing Placement of New Home
- 6. Approved Septic System Design where applicable
- 7. Contractor Certificate of Liability Insurance
- 8. Contractor Certificate of NYS Workman's Compensation Insurance & Disability
- 9. Fee (See Permit Application)
- 10. Onondaga County Plumbing (315)435-6614 (For ALL Plumbing inspections,
Health Department (315)435-6617, Onondaga County Water Authority (OCWA) (315)455-7061
- 11. Electrical Inspection Agencies (Choose One)
 - 1) CNY Electrical Inspection, LLC Larry Kinne (315-633-0027)
 - 2) Commonwealth Electrical Inspection Service, 1-800-801-0309
 - 3) The Inspector, Tim Willsey 1-800-487-0535 or 315-247-9162
 - 4) Middle Department Inspection Agency, Aaron Bellows 315-452-5304

Permit approval time will be based on the extent of the project – A MINIMUM OF 5 BUSINESS DAYS

All plumbing, electrical and driveway permits must be applied for before the release of the building permit.

Town of Clay

NOTICE OF UTILIZATION OF TRUSS TYPE CONSTRUCTION,
PRE-ENGINEERED WOOD CONSTRUCTION AND/OR TIMBER
CONSTRUCTION

Owner of Subject Property: _____

Subject Property: Street address and tax map number of the subject property

Check what permit is for

- New Residential Structure
- Addition to existing residential structure
- Rehabilitation to existing residential structure
 - to be constructed or performed at the subject property reference above will utilize
(Check applicable line)
- truss type construction (TT)
- pre-engineered wood construction (PW)
- timber construction (TC)

in the following location(s) (check applicable line):

- floor framing, including girders and beams (F)
- roof framing (R)
- floor framing and roof framing (FR).

By signing and dating below you state the above information will be followed.

Date: _____

Signature of person submitting the form _____

Print Name of above person _____

owner owners representative

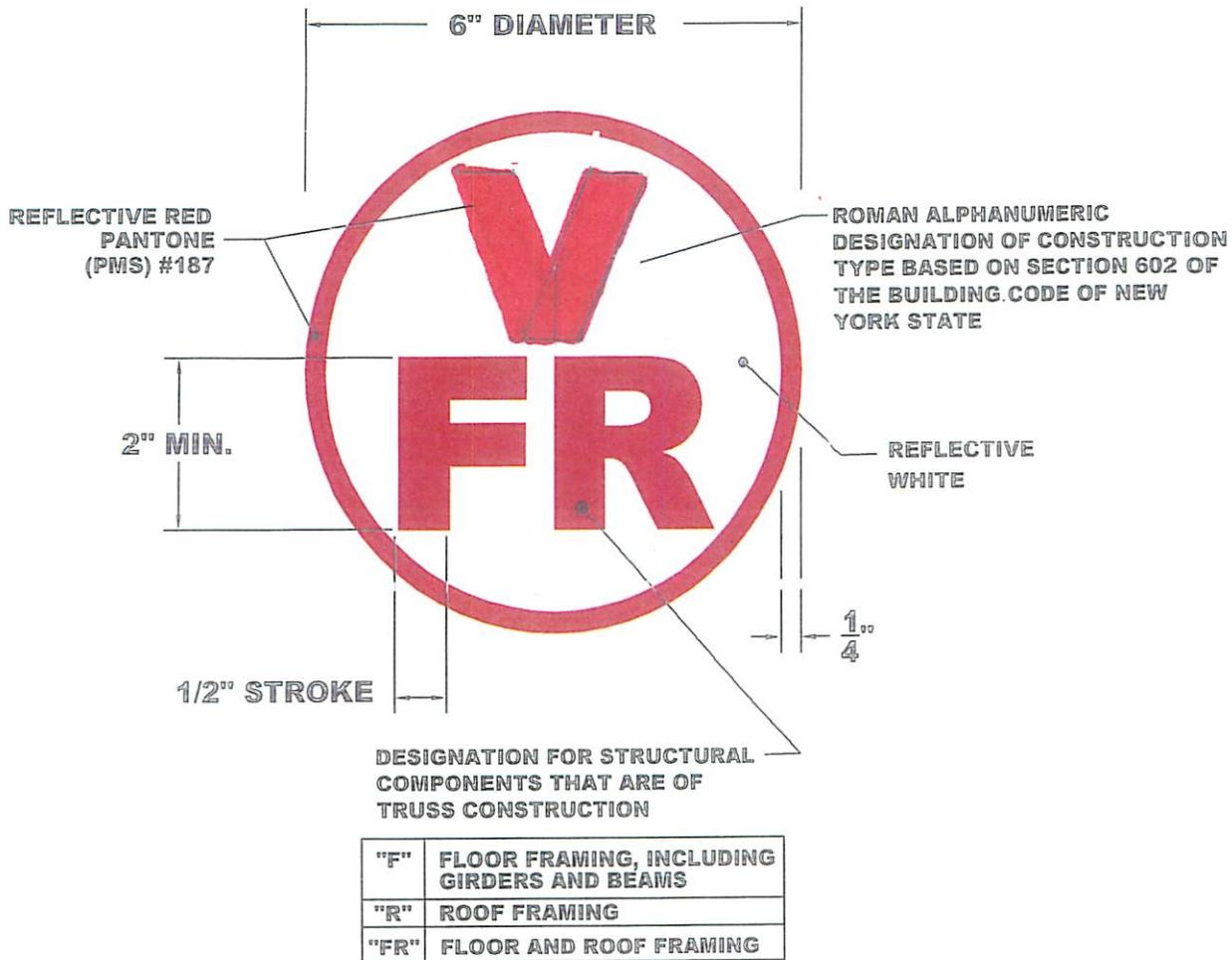
Section 1265.4. Sign or symbol.

(a) Each new residential structure and each addition to or rehabilitation of an existing residential structure that utilizes truss type construction, pre-engineered wood construction and/or timber construction shall be identified by a sign or symbol in accordance with the provisions of this Part.

(b) The sign or symbol required by this Part shall be affixed to the electric box attached to the exterior of the residential structure; provided, however, that:

- (1) if affixing the sign or symbol to the electric box would obscure any meter on the electric box, or if the utility providing electric service to the residential structure does not allow the sign or symbol to be affixed to the electric box, the sign or symbol shall be affixed to the exterior wall of the residential structure at a point immediately adjacent to the electric box; and
- (2) if no electric box is attached to the exterior of the residential structure or if, in the opinion of the authority having jurisdiction.

SAMPLE ONLY



TRUSS IDENTIFICATION SIGN
COMPLIANCE WITH 19 NYCRR PART 1264



EXAMPLE TRUSS IDENTIFICATION SIGN DATE:03/08/2005

**NEW YORK STATE DEPARTMENT OF STATE
DIVISION OF CODE ENFORCEMENT
AND ADMINISTRATION**

Get Free Help from Energy Code Experts

Residential Plan Review Checklist

2015 Residential Provisions as amended by the 2016 Energy Code Supplement

Project #: 43.6220.02- Date: _____ Name of Evaluator(s): _____

Building Contact: Name: _____ Phone: _____ Email: _____

Building Name & Address: _____

Subdivision: _____ Lot #: _____ Conditioned Floor Area: _____ ft²

Climate Zone: _____ County: _____ Jurisdiction: _____

Compliance Approach: Prescriptive Trade-Off Performance Compliance Software Other

Compliance Software Used: _____ Green Building/Above-Code Program? Yes No

Building Type: 1- and 2-Family, Detached: Single Family Modular Townhouse

Multifamily: Apartment Condominium

Project Type: New Building Existing Building Addition Existing Building Renovation

Special Considerations: Historic Building Commercial Space

Provisions Highlighted in Blue are Mandatory, Regardless of Compliance Path

IECC Section #	Pre-Inspection/Plan Review	Code Value	Verified Value	Complies			Comments/Assumptions ¹
				Y	N	N/A	
R103.2	Construction drawings and documentation available. Documentation sufficiently demonstrates energy code compliance.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Insulation materials and their R-values			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fenestration U-factors			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Area-weighted U-factor			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mechanical system design criteria			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mechanical and service water heating system and equipment types, sizes and efficiencies			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Equipment and systems controls			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Duct sealing, duct and pipe insulation and location			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Lighting fixture schedule with wattage			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Air sealing			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.7	HVAC loads calculations: Heating system size(s): _____ Cooling system size(s): _____		kBtu: _____ kBtu: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Written Statement of Compliance from Design Professional				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

¹ Use Comments/Assumptions to document code requirements that pass due to exceptions, and specify the exception. Also use Comments/Assumptions to document multiple values observed for a given code requirement, such as multiple equipment efficiencies.

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
R401.3	Certificate Posting	In furnace/ utility room or approved location	Identify location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Slab edge insulation R-value.	Unheated: R-10 Heated: R-15	R-_____ <input type="checkbox"/> Unheated <input type="checkbox"/> Heated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Slab edge insulation depth/length.	2 ft. Z-4 & 5 4 ft. Z-6	_____ ft.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Basement wall insulation R-value ⁱ .	Continuous: R-10 Z-4 R-15 Z-5, Z-6 Cavity: R-13 Z-4 R-19 Z-5, Z-6	R-_____ R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.9	Basement wall insulation depth.	10 ft. or to basement floor	_____ ft.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2 And R402.2.11	Crawl space wall insulation R-value. From floor to finished grade, plus 2' vertical or horizontal	Continuous: R-10 Z-4 R-15 Z-5, Z-6 Cavity: R-13 Z-4 R-19 Z-5, Z-6	R-_____ R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.11	Crawl space continuous vapor retarder	Required Class I		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R303.2.1	Exposed foundation insulation protection.	6" below grade		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.9	Snow melt controls.	Automatic controls over 50°F		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Fenestration U-factor ⁱⁱ	Max: U-0.35 Z-4 U-0.32 Z5, Z-6	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.5	Maximum Fenestration U-factor, Area weighted average (trade-offs)	Max: U-0.48 Z-4, Z-5 U-0.40 Z-6	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Glazed Fenestration SHGC	Max: 0.40 Z-4 NR Z-5, Z-6	SHGC-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.3	Glazed fenestration air leakage.	0.3 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Window Manufacturer						
R402.4.3	Sliding door air leakage.	0.3 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.3	Swinging door air leakage	0.5 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Door Manufacturer						
Table R402.1.2	Floor insulation R-value.	Wood: R-19 Z-4 R-30 Z- 5 & 6 ⁱⁱⁱ Steel: ^{iv} See footnote	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Wall insulation R-value	Wood: Z-4 and Z-5 = R-20 or R-13+5 Z-6 = R-20+5 or 13+10 Steel: ^v See footnote	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
Table R402.1.2	Ceiling insulation R-value	Wood: R-49 (All Zones) Steel Truss ^{vi} R-38+5	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.3	Eave Baffle	For air-permeable insulation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Mass wall insulation R-value.	R-8/13 Z-4 ^{vii} R-13/17 Z-5 ^{vii} R-15/20 Z6 ^{vii}	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom wall insulation (Enclosing conditioned space)	Per Table R402.1.2	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom wall insulation (Thermally isolated and conditioned)	R-13 All climate zones	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom ceiling insulation (Enclosing conditioned space)	Per Table R402.1.2	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom ceiling insulation (Thermally isolated and conditioned)	R-19 Z-4 R-24 Z-5, Z-6	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom glazing U-factor (Enclosing conditioned space)	Per Table R402.1.2	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom glazing U-factor (Thermally isolated and conditioned)	U-0.45 max. (All Zones)	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom skylight U-factor (Enclosing conditioned space)	Per Table R402.1.2	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom skylight U-factor (Thermally isolated and conditioned)	U-0.70 max. (All Zones)	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Skylight Manufacturer						
R402.2.4	Attic access hatch and door (insulation)	R-49 (All Zones)	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.4	Attic access hatch and door (weather-stripping)	Wood frame or equivalent insul. retainer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.6	Tenant separation walls	R-10 w/ air seal	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4	Air Leakage (Building Thermal Envelope)	All building materials installed per Table R402.1.1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.1.2	Air Leakage Testing	3 air changes per hour (All zones) Blower door test	<input type="checkbox"/> Stated <input type="checkbox"/> Stated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.5	IC-rated recessed lighting fixtures meet infiltration criteria.	≤ 2.0 cfm air leakage Sealed	<input type="checkbox"/> Stated <input type="checkbox"/> Stated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.4	Rooms containing fuel burning appliances	Outside or enclosed in a room	<input type="checkbox"/> Meets exceptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.1.1	Vapor Retarder (IRC R702.7)	Class I or II (Zones 5 and 6 only)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.1.1	Thermostat	Programmable		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
R403.3.1	Duct insulation.	Supply & Return in Attics: R-8 for ≥ 3 " Dia. R-6 for < 3 " Dia. Other: R-6 for ≥ 3 " Dia. R-4.2 for < 3 " Dia.	<input type="checkbox"/> Inside building thermal envelope exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.2	Duct sealing complies with listed sealing methods.	All joints and seams	<input type="checkbox"/> Meets exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.3	Duct Testing	0.1 inch w.g. pressure differential Rough-in test required Post construction test required	<input type="checkbox"/> Stated <input type="checkbox"/> Stated <input type="checkbox"/> Stated <input type="checkbox"/> Exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.5	Building cavities NOT used as ducts or plenums	Stated? Shown?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.4	HVAC piping insulation.	R-3 ($>105^{\circ}\text{F}$ or $<55^{\circ}\text{F}$)	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.5.1	Heated water circulation and temperature maintenance system	Per requirements of Section R403.5.1.1 or R403.5.1.2	<input type="checkbox"/> Circulation System <input type="checkbox"/> Heat Trace System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.5.3	Hot water pipe insulation	R-3 per specified locations		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R404.1	Lighting – Minimum 75% of lamps are high efficacy.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.2	Wood burning fireplace	Tight-fitting flue damper or doors		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.10	Pool heaters, covers, and automatic or accessible manual controls.	Accessible on/off switch. Time Switch		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ⁱⁱ One side-hinged door up to 24 ft² can be exempted from the prescriptive door U-factor requirements.

ⁱⁱⁱ Or insulation sufficient to fill the cavity, R-19 minimum.

^{iv} Floor steel frame equivalent: See Table R402.2.6

^v Wall steel frame equivalent: See Table R402.2.6

^{vi} Steel truss equivalent: See Table R402.2.6

^{vii} The second R-value applies when more than half the insulation is on the interior of the mass wall.

Table R402.4.1.1
Air Barrier and Insulation Installation



Component	Air Barrier Criteria	Insulation Installation Criteria
General requirements	A continuous air barrier shall be installed in the building envelope. The exterior thermal envelope contains a continuous air barrier. Breaks or joints in the air barrier shall be sealed.	Air-permeable insulation shall not be used as a sealing material.
Ceiling/attic	The air barrier in any dropped ceiling/soffit shall be aligned with the insulation mid any gaps in the air barrier shall be sealed. Access openings, drop down stairs or knee wall doors to unconditioned attic spaces shall be sealed.	The insulation in any dropped ceiling/soffit shall be aligned with the air barrier.
Walls	The junction of the foundation and sill plate shall be sealed. The junction of the top plate and the top of exterior walls shall be sealed. Knee walls shall be sealed.	Cavities within corners and headers of frame walls shall be insulated by completely filling the cavity with a material having a thermal resistance of R-3 per inch minimum. Exterior thermal envelope insulation for framed walls shall be installed in substantial contact and continuous alignment with the air barrier.
Windows, skylights and doors	The space between window/door jambs and framing, and skylights and framing shall be sealed.	
Rim Joists	Rim joists shall include the air barrier.	Rim joists shall be insulated.
Floors (including above garage And cantilevered floors)	The air barrier shall be installed at any exposed edge of insulation.	Floor framing cavity insulation shall be installed to maintain permanent contact with (he underside of subfloor decking, or floor framing cavity insulation shall be permitted to be in contact with the top side of sheathing, or continuous insulation installed on the underside of floor framing and extends from the bottom to the top of all perimeter floor framing members.
Crawl space walls	Exposed earth in unvented crawl spaces shall be covered with a Class I vapor retarder with overlapping joints taped.	Where provided instead of floor insulation, insulation shall be permanently attached to the Crawlspace walls.
Shafts, penetrations	Duct shafts, utility penetrations, and flue shafts opening to exterior or unconditioned space shall be sealed.	
Narrow cavities		Batts in narrow cavities shall be cut to fit, or narrow cavities shall be filled by insulation that on installation readily conforms to the available cavity space.
Garage separation	Air sealing shall be provided between the garage and conditioned spaces.	
Recessed lighting	Recessed light fixtures installed in the building thermal envelope shall be sealed to the drywall.	Recessed light fixtures installed in the building thermal envelope shall be air tight and IC rated.
Plumbing and wiring		Batt insulation shall be cut neatly to fit around wiring and plumbing in exterior walls, or insulation that on installation readily conforms to available space shall extend behind piping and wiring
Shower/tub on exterior wall	The air barrier installed at exterior walls adjacent to showers and tubs shall separate them from the showers and tubs.	Exterior walls adjacent to showers and tubs shall Be installed.
Electrical/phone box on exterior wall	The air barrier shall be installed behind electrical or communication boxes or air-sealed boxes shall be installed.	
HVAC register boots	HVAC register boots that penetrate building thermal envelope shall be sealed to the subfloor or drywall.	
Concealed sprinklers	When required to be sealed, concealed fire sprinklers shall only be sealed in a manner that is recommended by the manufacturer. Caulking or other adhesive sealants shall not be used to fill voids between fire sprinkler cover plates and walls or ceilings.	

Get Free Help from Energy Code Experts

Residential Inspection Checklist

2015 IECC Commercial Provisions as amended by the 2016 Energy Code Supplement

Project #: 43.6220.02- Date: _____ Name of Evaluator(s): _____

Building Contact: Name: _____ Phone: _____ Email: _____

Building Name & Address: _____

Subdivision: _____ Lot #: _____ Conditioned Floor Area: _____ ft²

Climate Zone: _____ County: _____ Jurisdiction: _____

Compliance Approach: Prescriptive Trade-Off Performance Compliance Software Other

Compliance Software Used: _____ Green Building/Above-Code Program? Yes No

Building Type: 1- and 2-Family, Detached: Single Family Modular Townhouse

Multifamily: Apartment Condominium

Project Type: New Building Existing Building Addition Existing Building Renovation

Special Considerations: Historic Building Commercial Space

Provisions Highlighted in Blue are Mandatory, Regardless of Compliance Path

IECC Section #	Pre-Inspection/Plan Review	Code Value	Verified Value	Complies			Comments/Assumptions ¹
				Y	N	N/A	
R103.2	Construction drawings and documentation available. Documentation sufficiently demonstrates energy code compliance.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Insulation materials and their R-values			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Fenestration U-factors			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Area-weighted U-factor			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mechanical system design criteria			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Mechanical and service water heating system and equipment types, sizes and efficiencies			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Equipment and systems controls			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Duct sealing, duct and pipe insulation and location			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Lighting fixture schedule with wattage			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Air sealing			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.7	HVAC loads calculations: Heating system size(s): _____ Cooling system size(s): _____		kBtu: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Written Statement of Compliance from Design Professional			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

¹ Use Comments/Assumptions to document code requirements that pass due to exceptions, and specify the exception. Also use Comments/Assumptions to document multiple values observed for a given code requirement, such as multiple equipment efficiencies.

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
R401.3	Certificate Posting	In furnace/ utility room or approved location	Identify location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Slab edge insulation R-value.	Unheated: R-10 Heated: R-15	R-_____ <input type="checkbox"/> Unheated <input type="checkbox"/> Heated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Slab edge insulation depth/length.	2 ft. Z-4 & 5 4 ft. Z-6	_____ ft.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Basement wall insulation R-value ⁱ .	Continuous: R-10 Z-4 R-15 Z-5, Z-6 Cavity: R-13 Z-4 R-19 Z-5, Z-6	R-_____ R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.9	Basement wall insulation depth.	10 ft. or to basement floor	_____ ft.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2 And R402.2.11	Crawl space wall insulation R-value. From floor to finished grade, plus 2' vertical or horizontal	Continuous: R-10 Z-4 R-15 Z-5, Z-6 Cavity: R-13 Z-4 R-19 Z-5, Z-6	R-_____ R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.11	Crawl space continuous vapor retarder	Required Class I		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R303.2.1	Exposed foundation insulation protection.	6" below grade		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.9	Snow melt controls.	Automatic controls over 50°F		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Fenestration U-factor ⁱⁱ	Max: U-0.35 Z-4 U-0.32 Z5, Z-6	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.5	Maximum Fenestration U-factor, Area weighted average (trade-offs)	Max: U-0.48 Z-4, Z-5 U-0.40 Z-6	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Glazed Fenestration SHGC	Max: 0.40 Z-4 NR Z-5, Z-6	SHGC-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.3	Glazed fenestration air leakage.	0.3 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Window Manufacturer						
R402.4.3	Sliding door air leakage.	0.3 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.3	Swinging door air leakage	0.5 cfm/ft ² max	_____ cfm/ ft ²	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Door Manufacturer						
Table R402.1.2	Floor insulation R-value.	Wood: R-19 Z-4 R-30 Z- 5 & 6 ⁱⁱⁱ Steel: ^{iv} See footnote	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Wall insulation R-value	Wood: Z-4 and Z-5 = R-20 or R-13+5 Z-6 = R-20+5 or 13+10 Steel: ^v See footnote	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
Table R402.1.2	Ceiling insulation R-value	Wood: R-49 (All Zones) Steel Truss ^{vii} R-38+5	R-_____ <input type="checkbox"/> Wood <input type="checkbox"/> Steel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.3	Eave Baffle	For air-permeable insulation		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Table R402.1.2	Mass wall insulation R-value.	R-8/13 Z-4 ^{vii} R-13/17 Z-5 ^{vii} R-15/20 Z6 ^{vii}	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom wall insulation (Enclosing conditioned space)	Per Table R402.1.2	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom wall insulation (Thermally isolated and conditioned)	R-13 All climate zones	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom ceiling insulation (Enclosing conditioned space)	Per Table R402.1.2	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.13	Sunroom ceiling insulation (Thermally isolated and conditioned)	R-19 Z-4 R-24 Z-5, Z-6	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom glazing U-factor (Enclosing conditioned space)	Per Table R402.1.2	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom glazing U-factor (Thermally isolated and conditioned)	U-0.45 max. (All Zones)	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom skylight U-factor (Enclosing conditioned space)	Per Table R402.1.2	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.3.5	Sunroom skylight U-factor (Thermally isolated and conditioned)	U-0.70 max. (All Zones)	U-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Skylight Manufacturer						
R402.2.4	Attic access hatch and door (insulation)	R-49 (All Zones)	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.2.4	Attic access hatch and door (weather-stripping)	Wood frame or equivalent insul. retainer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.6	Tenant separation walls	R-10 w/ air seal	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4	Air Leakage (Building Thermal Envelope)	All building materials installed per Table R402.1.1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.1.2	Air Leakage Testing	3 air changes per hour (All zones) Blower door test	<input type="checkbox"/> Stated <input type="checkbox"/> Stated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.5	IC-rated recessed lighting fixtures meet infiltration criteria.	≤ 2.0 cfm air leakage Sealed	<input type="checkbox"/> Stated <input type="checkbox"/> Stated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.4	Rooms containing fuel burning appliances	Outside or enclosed in a room	<input type="checkbox"/> Meets exceptions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.1.1	Vapor Retarder (IRC R702.7)	Class I or II (Zones 5 and 6 only)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.1.1	Thermostat	Programmable		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

IECC Section #	Requirement	Code Value	Verified Value	Complies			Comments/Assumptions
				Y	N	N/A	
R403.3.1	Duct insulation.	Supply & Return in Attics: R-8 for ≥ 3 " Dia. R-6 for < 3 " Dia. Other: R-6 for ≥ 3 " Dia. R-4.2 for < 3 " Dia.	<input type="checkbox"/> Inside building thermal envelope exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.2	Duct sealing complies with listed sealing methods.	All joints and seams	<input type="checkbox"/> Meets exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.3	Duct Testing	0.1 inch w.g. pressure differential Rough-in test required Post construction test required	<input type="checkbox"/> Stated <input type="checkbox"/> Stated <input type="checkbox"/> Stated <input type="checkbox"/> Exception	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.3.5	Building cavities NOT used as ducts or plenums	Stated? Shown?		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.4	HVAC piping insulation.	R-3 ($>105^{\circ}\text{F}$ or $<55^{\circ}\text{F}$)	R-_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.5.1	Heated water circulation and temperature maintenance system	Per requirements of Section R403.5.1.1 or R403.5.1.2	<input type="checkbox"/> Circulation System <input type="checkbox"/> Heat Trace System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.5.3	Hot water pipe insulation	R-3 per specified locations		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R404.1	Lighting – Minimum 75% of lamps are high efficacy.			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R402.4.2	Wood burning fireplace	Tight-fitting flue damper or doors		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
R403.10	Pool heaters, covers, and automatic or accessible manual controls.	Accessible on/off switch. Time Switch		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ⁱⁱ One side-hinged door up to 24 ft² can be exempted from the prescriptive door U-factor requirements.

ⁱⁱⁱ Or insulation sufficient to fill the cavity, R-19 minimum.

^{iv} Floor steel frame equivalent: See Table R402.2.6

^v Wall steel frame equivalent: See Table R402.2.6

^{vi} Steel truss equivalent: See Table R402.2.6

^{vii} The second R-value applies when more than half the insulation is on the interior of the mass wall.