

**CERTIFICATE OF COMPLIANCE**

This compliance document is only applicable to simple alterations that do not require HERS verification for compliance. When HERS verification is required, a CF1R-ALT-01 shall first be registered with a HERS Provider Data Registry.

Alterations to Space Conditioning Systems that are exempt from HERS verification requirements may use the CF1R-ALT-05 and CF2R-ALT-05 Compliance Documents. Possible exemptions from duct leakage testing include: less than 25 feet (ft) of ducts were added or replaced; or the existing duct system was insulated with asbestos; or the existing duct system was previously tested and passed by a HERS Rater. If space conditioning systems are altered and are not exempt from HERS verification, then a CF1R-ALT-02 must be completed and registered with a HERS Provider Data Registry.

Alterations that utilize closed cell Spray Polyurethane Foam (ccSPF) with a density of 1.5 to less than 2.5 pounds per cubic foot having an R-value greater than 5.8 per inch, or open cell Spray Polyurethane Foam (ocSPF) with a density of 0.4 to less than 1.5 pounds per cubic foot having an R-value of 3.6 per inch, shall complete and register a CF1R-ALT-01 with a HERS Provider Data Registry.

If more than one person has responsibility for installation of the items on this certificate, each person shall prepare and sign a certificate applicable to the portion of construction for which they are responsible. Alternatively, the person with chief responsibility for construction shall prepare and sign this certificate for the entire construction. All applicable Mandatory Measures shall be met. Temporary labels shall not be removed before verification by the building inspector.

Project Details

| Field Name | Data Entry | Field Name | Data Entry |
|-------------------|------------|--------------------|------------|
| Project Name | | Enforcement Agency | |
| Dwelling Address | | Permit Number | |
| City and Zip Code | | Date Permit Issued | |



A. GENERAL INFORMATION

| Field | Field Name | Data Entry |
|-------|---|------------|
| 01 | Project Name | |
| 02 | Date Prepared | |
| 03 | Project Location | |
| 04 | Building Front Orientation (deg or cardinal) | |
| 05 | CA City | |
| 06 | Number of Altered Dwelling Units | |
| 07 | Zip Code | |
| 08 | Fuel Type | |
| 09 | Climate Zone | |
| 10 | Total Conditioned Floor Area (ft ²) | |
| 11 | Building Type | |
| 12 | Slab Area (ft ²) | |
| 13 | Project Scope | |

**G. Space Conditioning (SC) Systems – Heating/Cooling (Prescriptive Section 150.2(b))**

Alterations to Space Conditioning Systems shall be exempt from HERS verification requirements as prerequisite for use of the CF1R-ALT-05 and CF2R-ALT-05 compliance documents. If new space conditioning systems are installed or existing systems are altered and are not exempt from HERS verification, then a CF1R-ALT-02 shall be completed and registered with a HERS Provider Data Registry. In each row below for each dwelling unit in the building, check the box that indicates the exemption from HERS verification compliance:

- ☐ a: space conditioning system was not altered;
- ☐ b: less than 25 ft of ducts were added or replaced;
- ☐ c: (exempt from duct leakage testing) if: the existing duct system was insulated with asbestos;
- ☐ d: (exempt from duct leakage testing) if: the existing duct system was previously tested and passed by a HERS Rater.

| 01 | 02 | 03 |
|----------------------------------|-----------------------------------|---|
| SC System Identification or Name | SC System Location or Area Served | Exemption from HERS Verification |
| | | <input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d |
| | | <input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d |
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| | | <input type="radio"/> a <input type="radio"/> b <input type="radio"/> c <input type="radio"/> d |



Documentation Author's Declaration Statement

1. I certify that this Certificate of Compliance documentation is accurate and complete.

| | |
|----------------------------|---|
| Documentation Author Name: | Documentation Author Signature: |
| Company: | Signature Date: |
| Address: | CEA/ HERS Certification Identification (if applicable): |
| City/State/Zip: | Phone: |

Responsible Person's Declaration Statement

I certify the following under penalty of perjury, under the laws of the State of California:

1. The information provided on this Certificate of Compliance is true and correct.
2. I am eligible under Division 3 of the Business and Professions Code to accept responsibility for the building design or system design identified on this Certificate of Compliance (responsible designer).
3. The energy features and performance specifications, materials, components, and manufactured devices for the building design or system design identified on this Certificate of Compliance conform to the requirements of Title 24, Part 1 and Part 6 of the California Code of Regulations.
4. The building design features or system design features identified on this Certificate of Compliance are consistent with the information provided on other applicable compliance documents, worksheets, calculations, plans and specifications submitted to the enforcement agency for approval with this building permit application.
5. I understand that a registered copy of this Certificate of Compliance shall be 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 registered copy of this Certificate of Compliance is required to be included with the documentation the builder provides to the building owner at occupancy.

| | |
|----------------------------|---------------------------------|
| Responsible Designer Name: | Responsible Designer Signature: |
| Company: | Date Signed: |
| Address: | License: |
| City/State/Zip: | Phone: |

For assistance or questions regarding the Energy Standards, contact the Energy Hotline at: 1-800-772-3300

CF1R-ALT-05-E User Instructions

NOTE: If more space is needed, print a duplicate page and fill in.

Minimum requirements for prescriptive alteration compliance can be found in Building Energy Efficiency Standards Section 150.2(b)1.

Completing these forms will require that you have the Reference Appendices for the 2019 Building Energy Efficiency Standards (P400-2018-020). This document contains the Joint Appendices which are used to determine climate zone and to complete the section for opaque surfaces. When the term CF1R is used it means the CF1R-ALT-05. Worksheets are identified by their entire name and subsequently by only the worksheet number, such as ENV-02.

Instructions for sections with column numbers and row letters are given separately.

If any part of the alteration does not comply, prescriptive compliance fails, in which case the performance compliance approach must be used in an attempt to achieve compliance.

A. General Information

1. Project Name: Identifying information, such as owner's name.
2. Date Prepared: Date of document preparation.
3. Project Location: Legal street address of property or other applicable identifying information.
4. Building Front Orientation: Building front orientation expressed in degrees, where North = 0, East = 90, South = 180, and West = 270. Indicate cardinal if it is a subdivision project built in multiple orientations. The standards (section 100.1) include the following additional details for determining orientation:
 - Cardinal covers all orientations (for buildings that will be built in multiple orientations);
 - North is oriented to within 45 degrees of true north, including 45 degrees east of north;
 - East is oriented to within 45 degrees of true east, including 45 degrees south of east;
 - South is oriented to within 45 degrees of true south, including 45 degrees west of south;
 - West is oriented to within 45 degrees of true west, including 45 degrees north of west.
5. CA City: Legal city/town of property.
6. Number of Altered Dwelling Units: 1 for single-family
7. Zip Code: 5-digit zip code for the project location (used to determine climate zone).
8. Fuel Type: Natural Gas, Liquefied Propane Gas, or Electricity.

9. Climate Zone: From Reference Appendices, Joint Appendix, JA2.1.1.
10. Total Conditioned Floor Area: Enter the new conditioned floor area in square feet (ft²), as measured from the outside of exterior walls of the dwelling unit or building being altered.
11. Building Type: Single Family (includes duplex), or Multi-Family (a building that shares common walls and common floors or ceilings).
12. Slab Area: Area of the first floor slab (if any) in square feet (ft²).
13. Project Scope: Insulation, Roof Replacement, Fenestration/Glazing, Heating System, Cooling System, Duct System, and/or Water Heating System alteration.

~~B. Building Insulation Details (Section 150.2(b)1)~~

- ~~1. Tag/ID: A label (if any) from the plans, such as A1.4 or wall.~~
- ~~2. Assembly Type: Roof, Ceiling, Wall, or Floor.~~
- ~~3. Frame Type: Wood or Metal.~~
- ~~4. Frame Depth: Nominal dimensions of framing material in inches such as 2x4, 2x6, 2x8, 2x10.~~
- ~~5. Frame Spacing: 16 or 24 inches on center.~~
- ~~6. Proposed Cavity R-value: Insulation installed between framing.~~

~~Proposed Continuous Insulation R-value: R-value of rigid or continuous insulation (not interrupted by framing). See Table 4.3.4. of Reference Appendices, Joint Appendix, for metal frame construction.~~

~~NOTE: Section 110.8(d) specifies that if adding insulation to an existing attic, the resulting attic insulation must total R-22. However, the amount of insulation required is limited to the amount of room available for insulation without conflicting with Building Code Section 1203.2.~~

- ~~7. Proposed U-factor: The U-factor for the entire assembly.~~
- ~~8. Joint Appendix JA4 Reference Table: Table number used to determine the R-value or U-factor (e.g., an attic assembly is 4.2.1).~~
- ~~9. Joint Appendix JA4 Reference Cell: Cell number used to determine the R-value or U-factor (e.g., an R-38 ceiling with 24-inch on center framing is A21).~~
- ~~10. Required U-factor: From the requirements in Sections 110.8 and 150.0.~~
- ~~11. Comments: Any notes regarding location, unique conditions, or attachments.~~

- ~~28. Proposed Fenestration SHGC (Skylights): If necessary, enter the area-weighted average solar heat gain coefficient (SHGC) from the completed CF1R-ENV-02. Otherwise, report the single largest associated value from columns F11 or F14.~~
- ~~29. Required Fenestration SHGC (Skylights): From Section D., report the value of column 06b.~~
- ~~30. Is the Proposed Fenestration SHGC less than or equal to the Required Fenestration SHGC? Indicate Yes or No. If No, the project fails prescriptive compliance – specified fenestration SHGC must be reduced, or compliance may be attempted using the performance approach.~~

G. Space Conditioning (SC) Systems – Heating/Cooling

Requirements of the Standards apply to a heating and cooling system alteration based on the type of alteration and the system type (Section 150.2(b)1). A completely new system will meet all mandatory and prescriptive requirements, which vary by climate zone (based on Section 150.2(b)1C).

When parts of a system are replaced, it may trigger some of the same requirements that apply to new systems and duct alterations. A Certificate of Compliance for Alterations to Space Conditioning Systems (CF1R-ALT-02) is required for each dwelling unit with a space conditioning system alteration.

1. Space Conditioning (SC) System Identification or Name: Name of the space conditioning (SC) system or any other identifying name.
2. Space Conditioning (SC) System Location or Area Served: Zone, or area, served by the space conditioning (SC) system.
3. Exemption from HERS Verification: Section 150.2(b)1E
 - a. Space Conditioning (SC) System was not altered.
 - b. Duct systems with less than 25 linear feet in unconditioned spaces as determined by visual inspection.
 - c. Existing duct systems constructed, insulated or sealed with asbestos
 - d. Duct systems that have been documented to have been previously sealed as confirmed through field verification and diagnostic testing in accordance with procedures in the Reference Appendices, Residential Appendix, RA3.1.