Energy Audit Data Collection Form

Case Type | App. Date:

Application #: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

ClientAddress: , | County: | ClientPrecinct:

Dwelling Type

1. Site Built
2. Mobile Home
3. Duplex
4. Multifamily(>4)
5. Shelter
6. Other"

Ownership

Owner
Renter
Other

Occupants

SeniorFlag:
JuvenileFlag:
DisabilityFlag:

# of Occupants | ClientLanguage:

Ethniciy | DisabilityType:

Contacts

1. Applicant of Record
2. Other Contact
3. Landlord / Owner 1
4. Landlord / Owner 2

Type:	Contact Name:	Relation:	Day Phone:

Wall Type

1. Baloon Frame
2. Platform Frame
3. Masonry / Stone
4. Cinder Block
5. Adobe
6. Other

Exterior Type

1. Wood
2. Metal(Vinyl)
3. Stucco
4. Brick(Stone)
5. Masonite
6. Other

Wall Area Sq'

total gross area of the exterior wall, including windows and doors.

Exposure

1. Outside
2. Buffered
3. Attic

Existing Insulation

1. None
2. Bln Cellulose
3. Bln Fiberglass
4. Rockwool
5. Fiberglass Batts
6. Polystyrene / Other

Insulation to Add

1. None
2. Bln Cellulose
3. Bln Fiberglass

Walls	Wall Type	Stud Size	Exterior Type	W ' / H '	Area Sq'	Orientation	Exposure	Exist. Insul.	Exist RVal	Add Insul / Add R	
WALL 01											
WALL 02											
WALL 03											
WALL 04											
WALL 05											

WindowType

1. Jalousie
2. Slider
3. Fixed
4. Door Window
5. Door Slider
6. Skylight

Slider

1. Horizontal
2. Vertical
3. Left - Right
4. Right - Left

Frame Type

1. Wood / Vinyl
2. Metal
3. Improved Metal
4. COLOR - B M W

Glazing

1. Single Pane
2. Sngl. P. W/ Storm
3. Sngl P. Bad/ Storm
4. Double Pane
5. Dbl. P. W/ Low E

Interior Shade

1. Drapes
2. Blinds / Shades
3. Drapes w/ Shades
4. None

Shade

Ext. Shade

1. Low E Film
2. Solar Screen
3. Awning
4. Carport
5. Porch
6. None

Leakiness

1. Very Tight
2. Tight
3. Medium
4. Loose
5. Very Loose

Number

# of windows with the same description on this wall.

Retrofit

1. Evaluate
2. Weatherize
3. Replace
4. Rep. W/Low E
5. Add Storm
6. None

Fabric

C - Charcoal
B - Bronze
G - Gray

Frame Sz

1. 5/16
2. 3/8

F.Color

B M W

Windows	Wall #	Type	Slider	Frame	Color	Glazing	Interior	Exterior	% Shade	Leakiness	# of Same	Retro	W "	H "	Fab	Frm	F.C
WIND 01																	
WIND 02																	
WIND 03																	
WIND 04																	

Application #: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

Wall Type
1. Baloon Frame 4. Cinder Block
2. Platform Frame 5. Adobe
3. Masonry / Stone 6. Other

Exterior Type
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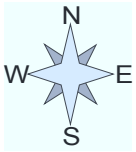
total gross area of the exterior wall, including windows and doors.



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Walls	Wall Type	Stud Size	Exterior Type	W ' / H '	Area Sq'	Orientation	Exposure	Exist. Insul.	Exist RVal	Add Insul / Add R	
WALL 06											
WALL 07											
WALL 08											
WALL 09											
WALL 10											
WALL 11											
WALL 12											
WALL 13											

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B - Bronze
G - Gray

Frame Sz
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2. 3/8

F.Color
B M W

Shade

Windows	Wall #	Type	Slider	Frame	Color	Glazing	Interior	Exterior	% Shade	Leakiness	# of Same	Retro	W "	H "	Fab	Frm	F.C
WIND 05																	
WIND 06																	
WIND 07																	
WIND 08																	
WIND 09																	

Door Type
1. H-Core Wood 4. Sngl Sliding Glass
2. S-Core Wood 5. Dbl Pane Glass
3. Insulated Steel

StormDoor
1. Adequate
2. Deteriorated
3. None

Number
# of Doors With the same Description

Measure
1. Repair
2. Replace

Swing
1. Right Hand
2. Left Hand

Lockset
1. DeadBolt
2. Knob
3. Combo

Air Seal *(+)= ADD*
1. Jamb Up 4. V-Seal (C/B)
2. Q-Lon
3. Sweep (M/B)

Threshold Oak/Bumper
1. 3/4 Oak 4. 1 x 5/8 Bumper
2. 1 Oak 5. 1/2 Bumper
3. 1 Bumper 6. 3/4 Bumper (B)

Hinge
1. Reg
2. NRP

Strike
1. Reg
2. Lrg

DoorCode	Wall #	Type	Area	Storm Dr.	Number	Measure	Swing	Width	Height	Thick	Lockset	Air Seal +	Thresh	Hinge	Strike	Viewer
DOOR 01																
DOOR 02																
DOOR 03																
DOOR 04																
DOOR 05																

Housing App#: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

ATTICS

Unfinished

AtticType	JoistSpace	Type	Material
1. Unfloored	1. 16 in	1. Batts	1. Fiberglass
2. Floored	2. 18 in	2. Blown	2. Rockwool
3. Cathedral / Flat	3. 24 in	3. Other	3. Cellulose

Existing Insulation

AtticCode	AtticType	Joist Sp	Area	Type	Material	Depth
UFA 01						
UFA 02						
UFA 03						
UFA 04						

Finished

Area Type	Floor Type	Type	Material
1. Outer Ceiling Joist	1. Unfloored	1. Batts	1. Fiberglass
2. Collar Beam	2. Floored	2. Blown	2. Rockwool
3. Kneewall		3. Other	3. Cellulose
4. Roof Rafter			

Existing Insulation

AtticCode	AreaType	Floor	Area	Type	Material	Depth
FA 01						
FA 02						
FA 03						
FA 04						
FA 05						
FA 06						
FA 07						

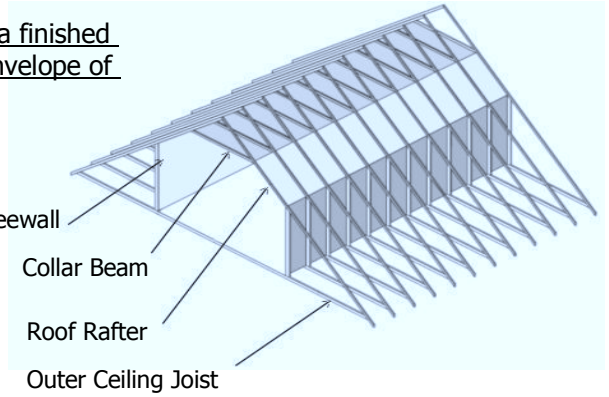
Additional Attic Framing Details

Type	Centers	Heat Sources	Sq ft.
1. Cathedral	1. 16 in	1. WH / Furn	
2. Kneewall	2. 18 in	2. Exh Fan	
3. Skylight	3. 24 in	3. Rec Lght	

Type	Centers	Heat Sources	Sq ft.
1. Cathedral	1. 16 in	1. WH / Furn	
2. Kneewall	2. 18 in	2. Exh Fan	
3. Skylight	3. 24 in	3. Rec Lght	

	Exist	Add
Hatch	○	○
Stairbox	○	○
Batt/Baffle	○	○
Foam WS	○	○

The four parts of a finished attic define the envelope of the heated area



FOUNDATIONS

Foundation Type

1. Conditioned
2. Non Conditioned
3. Vented Non Cond.
4. Unintentionally Cond.
5. Uninsulated Slab
6. Insulated Slab
7. Exposed Floor

FoundCode	FoundType
FD 01	
FD 02	
FD 03	

Floor Area (sq ft)

Exist. Insul. R-Value

Sill Joist Size (in)

Perimeter to Insul (ft)

F. Wall Height (ft)

Height Exposed (%)

Perimeter (ft)

Exist. R-Value

Foundation Insulation options

○ Floor ○ None

BUILDING SHELL - Comments

Include roof type, condition, and venting

Housing App#: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

Required Heating System Details

Heating Equipment Type		Fuel Type		Equipment Location
1. Gravity Furnace	6. Heat Pump	1. Natural Gas	5. Oil	1. Heated Space
2. Forced Air Furnace	7. V-Space heater	2. Electricity	6. Propane	2. Uncond. Space
3. Fixed Elect Resistance	8. UnV-Space Heater	3. Wood	7. Coal	3. Unintentional Heated
4. Portable Electric	9. V-Wall Furnace	4. Kerosene	8. Other	
5. Hot Water Boiler	10. UnV-Wall Furnace			

SysCode	Manufacturer	Model #	Photo Documented
HS01			
HS02			
HS03			

Primary Sys	SysCode	Type	Fuel	% Supplied	Location	Sq'	Watts	Amps	Volt	Heat Pump Details HSPF or	Yr.Purch.
○	HS01										
○	HS02										
○	HS03										

Energy Index

FloorArea Sq' | Year Built

Cond. Stories

Input Heating Units		Condition	
1. No Input	4. Lbs/hr	1. Good	4. Broken (non-function
2. kBTU/hr	5. CCM	2. Fair	5. None
3. Gals/hr		3. Poor (functions)	

Uninsulated Supply Ducts

Duct Type Rect / Round	Length	Width	Height if Rectangular	Diameter if Circular

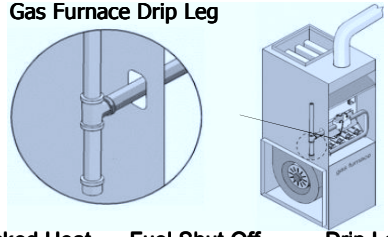
SysCode	InputUnits	InputRating	Output Cap. (in heat units)	SS Eff. %	EquipCond.
HS01					
HS02					
HS03					

Smart Therm	Auto Vent Damper Present	Recomd	Flue Dia	Pilot Light / IID IID	PilotLight	Summer	PowerBurn	Retention Head Present	Recomd
○	○	○		○	○	○	○	○	○
○	○	○		○	○	○	○	○	○
○	○	○		○	○	○	○	○	○

Additional Heating System Details

Burner Condition	Pilot Condition	Elect. Serv. Switch
1. Good	1. Good	1. Good
2. Fair	2. Fair	2. Fair
3. Poor (working)	3. Poor (working)	3. Poor (working)
4. Broken (not working)	4. Broken (not working)	4. Broken (not working)

Gas Furnace Drip Leg



Thermosstat Type

1. Mech (bimetallic)
2. Mech (mercury)
3. Elect (no setback)
4. Elect (w/ setback)

Combustion Air: Existing ○ Add ○

Seal Closet: No ○ Yes ○

SysCode	BurnerCond	PilotCond	E.Serv.Switch	C/O levels	GasLeak	Cracked Heat Exchanger	Fuel Shut Off Not Present	Drip Leg Not Present	Therm.Type	Day Setting	Night Setting
HS01					○	○	○	○			
HS02					○	○	○	○			
HS03					○	○	○	○			

Additional Comments

Housing App#: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

Cooling System Details

AC Unit Type 1. Central 2. Window 3. Heat Pump 4. Evaporative Cooler

AC Code	AC Type	Area Cooled (sq')	Size (kBTU/hr)	SEER or	Yr.Purchased	Manufacturer	Model #	Serial #	Photo Documented
AC01									○
AC02									
AC03									
AC04									

Additional Comments

Ducts / Infiltration

Duct Blower Method

WHOLE HOUSE BLOWER DOOR MEASUREMENTS

	Before WZN (Initial) [1]	After WZN Target [1]
Air Leakage Rate (CFM)		
at House Pressure Difference (Pa)	50	50

Blower Door Flow Ring Open ○ Ring A ○ Ring B ○ Ring C ○

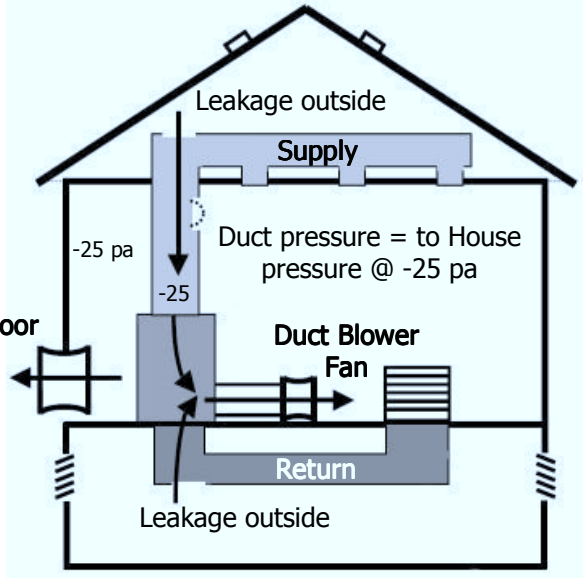
DUCT OPERATING PRESSURE

Duct Operating Pressures Before Duct Sealing	
Supply (Pa)	
Return (Pa)	

DUCT BLOWER MEASUREMENTS

Before Duct Sealing - Initial	Total [2]	Outside [3]	After Duct Sealing Target	Total [3]	Outside
Fan Flow (CFM)			Fan Flow (CFM)		
Duct Pressure (Pa)	25	25	Duct Pressure (Pa)	25	25
House Pressure WRTOutside (Pa)		25	House Pressure WRTOutside (Pa)		25

Duct Blower Flow Ring Open ○ Ring 1 ○ Ring 2 ○ Ring 3 ○



Leakage to Outside Depressurization Test

Conduct a 'Standard' Blower Door depressurization test. (open registers and Hvac filters removed)

Conduct a Duct Blower depressurization test. (seal return and supply registers)

With the return and supply registers sealed, use the Blower Door to depressurize the envelope to -25 pa.

With the house at -25 pa, and duct pressure at -25 pa, measure the duct CFM (WRT outside)

[1] Record initial, calculate target.

[2] Record total fan flow CFM.

[3] Record 'outside' calculate target.

Housing App#: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

B A S E L O A D S

Water Heater(s)

WH Code	Manufacturer	Model:	Serial #:	Photo
WH01				
WH02				

Fuel Type
1. Natural Gas
2. Electricity
3. Propane

Equipment Location
1. Heated Space
2. Uncond. Space
3. Unintentional Heated

Input Units
1. kBTU
2. kW

If WH wrap is present, skip Insul.Thick & Insul,Type

Is the first 5' of WH supply pipe insulated?

Insulation Type
1. Fiberglass
2. Polyurethane

Shower Heads

of Shower Heads

Shower Use (min/day)

Average GPM

WH Code	Fuel Type	Equip.Loc.	Rated Input	Input Units	Gallons	WH Wrap	Pipe Insul.	Original Tank Insul. Thick.	Insul. Type	Water Heater Condition Good	Fair	Poor	Burner Condition Good	Fair	Poor	CO Level	WH Stand
WH01																	
WH02																	

Comments:

R e f r i g e r a t o r

Photo

Manufacturer | **Model**

Refrigerator Style
1. Top Freezer
2. Side by Side
3. Single Door
4. Sngl Door w/ Freezer
5. Bottom Freezer
6. Other

Defrost
1. Automatic
2. Manual
3. Partial Auto
4. Other

Refrigerator Location
1. Heated Space
2. Uncond. Space
3. Unintentional Heated

Size cu ft

Available Space Dimesions

Height(in)

Width(in)

Depth(in)

Ice Maker

Door Type
Single
Double

Door Swing
Right Hand
Left Hand

Freezer Type
Top
Bottom

C o n s u m p t i o n

Label / Database Annual Consumption

kWhr/yr	Refrig Age	Door Seal Condition
	1. < 5 Yrs. 3. < 15 Yrs.	1. Good
	2. < 10 Yrs. 4. > 15 Yrs.	2. Some Wear
		3. Visible Gaps

Or

Metered Consumption

Minutes

Meter kWh

Temp F

Defrost
Manual Defrost
Includes Defrost Cycle

L i g h t i n g S y s t e m

Room Description
1. Family
2. Kitchen
3. Living
4. Rec
5. Dining
6. Bedroom
7. Bathroo
8. Utility

Location
1. Ceiling
2. Floor
3. Table
4. Wall
5. Closet
6. Other

Lamp Type
1. Standard
2. Floor
3. Other

Light Code	Room Desc	Room Location	Lamp Type	Qaunt.	Size (watts)	Usage (hr/day)
LT01						
LT02						
LT03						
LT04						
LT05						
LT06						
LT07						
LT08						
LT09						
LT10						

Housing App#: | ClientID: | Assessors: | Assessment Date:

ClientName: | Day Phone:

HEALTH & SAFETY

Whole House

Alarms Needed

- Smoke Detector
- CO Monitor

Carbon Monoxide Measurements

Rm with Heating System (ppm)	
Rm with Water Heater (ppm)	
Living Area (ppm)	
Kitchen (ppm)	

Comments

Building Shell

Attic

- Recessed Lights Present
- Chimney/Flue Incorect Shielding
- Wiring/Electrical Problems
- Inadequate Ventilation
- Water Leaks Present
- Moisture Problems Evident
- Vermiculite Present
- Other Problems

Walls

- Wiring/Electrical Problems
- Water Leaks Present
- Moisture Problems Evident
- Lead Based Paint is Likely
- Asbestos in Siding is Likely
- Other Problems

Crawlspace / Basement

- Vapor Barrier Needed
- Wiring/Electrical Problems
- Water Leaks Present
- Plumbing Leaks Present
- Moisture Problems Evident
- Other Problems

Equipment

Worse Case Condition Draft Measurements - SPACE HEATING SYSTEM

Date	Conducted During Audit	Conducted During Inspection	SysCode	Outdoor Temp (F)	Draft (Pa or in H20)	Spillage Time(sec)	Comments
			HS0__				
			HS0__				
			HS0__				

Worse Case Condition Draft Measurements - WATER HEATING SYSTEM

Date	Conducted During Audit	Conducted During Inspection	SysCode	Outdoor Temp (F)	Draft (Pa or in H20)	Spillage Time(sec)	Comments
			WH0__				
			WH0__				

Cook Stove CO Measurements

CO Measurement Oven (ppm)	
CO Measurement Burner 1 (ppm)	
CO Measurement Burner 2 (ppm)	
CO Measurement Burner 3 (ppm)	
CO Measurement Burner 4 (ppm)	

Gas Leak Present

Exhaust Fans

Bathrooms

- Missing
- Non Operational
- Improper Venting

Kitchen

- Missing
- Non Operational
- Improper Venting

Wood Stove / Fireplace

- Wood Stove / Fireplace is Present
- Improper Venting
- Inadequate Combustion Air

Clothes Dryer

- Improper Venting

Air-to-Air Heat Exchanger

- Exist
- Non Operational

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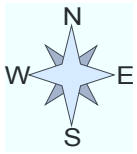

Exposure

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WALL 15											
WALL 16											
WALL 17											
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WALL 19											
WALL 20											
WALL 21											
WALL 22											
WALL 23											
WALL 24											
WALL 25											

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2. Solar Screen
3. Awning
4. Carport
5. Porch
6. None

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# of windows with the same description on this wall.

Retrofit

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3. Replace
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Frame Sz

1. 5/16
2. 3/8

F.Color

B M W

S h a d e

Windows	Wall #	Type	Slider	Frame	Color	Glazing	Interior	Exterior	% Shade	Leakiness	# of Same	Retro	W "	H "	Fab	Frm	F.C
WIND 10																	
WIND 11																	
WIND 12																	
WIND 13																	
WIND 14																	
WIND 15																	
WIND 16																	
WIND 17																	
WIND 18																	
WIND 19																	

Extra Building Shell page. Keep blank copies available and use as needed.

Housing App#:

ClientName:

Include the locations of; Heaters, A/C Units, Water Heaters, Attic Hatches, and Vents

○ Shielded - closely surrounded by other buildings ○ Normal - surrounded by trees / other bldgs ○ Exposed