

RESIDENTIAL BUILDINGS
1 & 2 Family-Multi Family, 3 stories or less

Date: _____
Address: _____
Builder: _____ Phone # _____
Homeowner: _____ Phone # _____

Please check all applicable:

- **Alteration, renovations or repairs**
- Proposed work does not affect the building envelope
- Roof Replacement-roof insulation values as specified under current IECC
- Envelope insulation requirements meet or exceed IECC requirements (table 402.1)
- Cavities filled with insulation materials which meet or exceed and R-value of 3.5/inch
- Include specifications and type of material
- HERS Index rating(Performance option)
- Work is exempt under 780 CMR 115.aa, exception_____

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- **Additions**
 - Energy Star Qualified Homes Thermal Bypass Inspection Checklist
 - Envelope insulation requirements meet or exceed 2009 IECC requirements (Table 402.1)
 - HERS index rating option(Performance option)

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- **New Construction**
 - HERS Index rating(Home energy Rating System-report must be included)
 - Rating of 65 or less(3000 sf or more)
 - Rating of 70 or less (3000 sf or less)

If utilizing the HERS index rating, please include the information below:

RESNET Certified HERS Rater: **(include copy of certification)**

Name _____
Address _____
Phone # _____

I, the undersigned, certify knowledge and understanding of the energy conservation requirements as enforced by The Town of Concord and certify that the above information is accurate to the proposed construction.

Building Owner Signature (1 & 2 Family) _____ Date _____

Contractor Signature _____ Date _____

If the work is under design provisions of Sec 116 780 CMR, Construction Control, the following is required:

Registered Design Professional (Multi-family) _____ Date _____

Registered Design Professional Signature _____ Date _____