

Pikes Peak **REGIONAL** Building Department

RESIDENTIAL HVAC EQUIPMENT CERTIFICATE - EL PASO COUNTY ONLY

Provide this certificate with heat loss, or optional heat gain, calculations for all new residential construction and additions. This form is part of the permanent record.

This is not a BESQCP
Submit BESQCP

DISAPPROVED
Plan Review
11/02/2009 11:41:32 AM
Submittal
EPC Planning & Community
Development Department

ADDRESS OR MASTER PLAN #: 5635 Molly Ct

CALCULATIONS:

- Duct Design New Structure Existing Structure Performance Test
 New Addition Only Existing Structure + New Addition (requires separate calculation for each)
- Envelope heat loss Hum 1,594 + Envelope 18,103 = 19,697 BTU/hr
 - Infiltration heat loss (.35 ach max) 4,829 BTU/hr
 - Envelope heat gain (optional) _____ BTU/hr
 - Infiltration heat gain (optional) _____ BTU/hr
 - Total heat loss (add lines 1 and 2)** 24,526 BTU/hr
 - Total heat gain (add lines 3 and 4 - optional) _____ BTU/hr
 - Type of heating appliance Rheem ROSH09AhhJ 12k Heat 9K Cool New Existing
 BTU/hr input 12,000 / Location Entry / Kitchen Area served Entry / Kitchen
 - Type of heating appliance Rheem ROSH09AhhJ 12k Heat 9K Cool New Existing
 BTU/hr input 12,000 / Location Entry / Kitchen Area served Entry / Kitchen
 - Type of cooling appliance Rheem ROSH15AHHJ 18K BTU Heat 14.5K Cool, New Existing
 BTU/hr input 18,000 / Location Master Bedroom Area served Master Bedroom
 - Type of cooling appliance 2kw Electric Heat New Existing
 BTU/hr input _____ / Location Laundry Room Area served Laundry

SUMMARY:

- Input of heating appliance(s)* 42,000 BTU/hr
- Altitude derate (x .80) 33600 BTU/hr
- Efficiency derate (output) _____ BTU/hr
- Electrical heating (1 watt = 3.413 BTU/hr) _____ BTU/hr
- Total Heating Output**** 33,600 BTU/hr
- Total Cooling** _____ BTU/hr

*If using high/low fired equipment, assign sum of the low fires on this line.

Applicant Signature Dana A. Miller Date 07-07-2020
 Print name & company Dana A. Miller Phone 719-243-6184

IECC/IRC VENTILATION VERIFICATION (New Homes Only)

- Indicate method of compliance with **Whole –house Mechanical Ventilation System** (M1507.3) (check all that apply)

Outside Air/Supply Exhaust

- List **Fan Type/Description, CFM, and Location** of **ALL** exhaust fans, including kitchen hoods. Check box if fan is part of Whole-house Mechanical Ventilation System. (Example: Exhaust fan, 120 CFM, Master Bathroom)

Exhaust Fan, 50 CFM, Master Bath

- Indicate **Ventilation Control** (check one)
 Constant Intermittent: _____ % per Table M1507.3.3(2)
- Specify location of **Whole House Ventilation Manual Override Control Switch**, if known, otherwise note as **To Be Determined**.