

Business Name/Address:							
Primary contact Name and e-mail:							
EEN Contractor:		Test-in date			Test-out date:		
Existing Insulation	Location (Edit as needed to describe scope)	Flat Attic	Slope/ Enclosed Ceiling	Foundation walls	Basement box sill	Exposed Floors	Exterior walls/rim
	Area (sq.ft.)						
	Insulation Type						
	Thickness (inches)						
	Condition						
	Existing R-value						
Proposed Insulation	Area (sq.ft.)						
	Insulation Type						
	Added Thickness						
	Final R-value						
	Thermal Barrier on exposed foam						
	Enveloped moved from flats to slopes			AG: ___ht BG: ___ht	Perimeter: ___ ft		
Air Leakage Tests	Air Sealing Notes						
	cfm50 pre-Wx		Testing limitations/irregularities/notes				
	cfm50 post-Wx						
Health and Safety	CO monitors		Notes:				
	BPI CAZ spillage/CO/fuel leaks		Notes:				
	Dryer / Exhaust fans vent outside?		Notes:				
	Vapor Barrier over dirt floors?		Notes:				
	Needs Mechanical Ventilation?		Notes:				
Existing Heating System	Heating System 1 Fuel Type and System Type (ex Oil Furnace)					Efficiency	%
	Heating System 2 Fuel Type and System Type (ex Oil Furnace)					Efficiency	%
	Annual Fuel Consumption (average annual)				Thermostat set-point (average)		
	Building Use (ex commercial, mixed use, residential only)					# res units	
	Cooling System Type and Age (ex Central AC, Room AC, None)					% of Building Cooled	%