

Energy Performance Partners, LLC

House Systems

Type Of Home:	<input checked="" type="checkbox"/> Wood Frame	<input type="checkbox"/> Wood/Brick Veneer	<input type="checkbox"/> Brick Veneer	<input type="checkbox"/> Stone Veneer	<input type="checkbox"/> Masonry					
Number of Stories:	<input type="checkbox"/> Single Story	<input type="checkbox"/> Story and a half	<input checked="" type="checkbox"/> Two Story	<input type="checkbox"/> Tri/Bi-Level	<input type="checkbox"/> Multiple Stories -					
Roof Material	<input checked="" type="checkbox"/> Asphalt	<input checked="" type="checkbox"/> Fiberglass	<input type="checkbox"/> Wood Shake	<input type="checkbox"/> Rolled Mineral	<input type="checkbox"/> Slate	<input type="checkbox"/> Asbestos Cement				
General Info	Year Built	<u>1870</u>	# of Bedrooms	<u>4</u>	# of Occupants	<u>3</u>	Sq Ft	<u>2,400</u>	Ave Ceiling	<u>8.5</u>
	Exterior Wall Color	<input checked="" type="checkbox"/> Light	<input type="checkbox"/> Medium	<input type="checkbox"/> Dark	Roof Color	<input type="checkbox"/> Light	<input checked="" type="checkbox"/> Medium	<input type="checkbox"/> Dark		
Roof Style	<input checked="" type="checkbox"/> Gable	<input type="checkbox"/> Gambrel	<input type="checkbox"/> Hip	<input type="checkbox"/> Shed	<input type="checkbox"/> Flat	<input type="checkbox"/> Mansard	<input type="checkbox"/> Combination	<input type="checkbox"/> Other		

Observed Conditions

		Serviceable	Needs work
Roof Covering:	<input type="checkbox"/> First third of useful life <input checked="" type="checkbox"/> Second third <input type="checkbox"/> Last third		X
Ventilation Systems:	<input checked="" type="checkbox"/> Soffit <input type="checkbox"/> Ridge <input type="checkbox"/> Gable <input checked="" type="checkbox"/> Roof <input type="checkbox"/> Fan <input type="checkbox"/> Turbine <input type="checkbox"/> None	X	
Plumbing Vents:	<input type="checkbox"/> Cast Iron <input type="checkbox"/> Plastic (PVC) <input type="checkbox"/> Copper <input type="checkbox"/> Other	X	
Chimney(s):	Chimney #1 North #2 East #3 #4		
	<input checked="" type="checkbox"/> Brick <input type="checkbox"/> Block <input checked="" type="checkbox"/> Metal <input type="checkbox"/> Siding Wrapped <input type="checkbox"/> Multiple Flues	X	
Gutter Type:	<input checked="" type="checkbox"/> Aluminum <input type="checkbox"/> Plastic <input type="checkbox"/> Galvanized <input type="checkbox"/> Copper <input type="checkbox"/> None	X	
Downspouts:	<input checked="" type="checkbox"/> Aluminum <input type="checkbox"/> Plastic <input type="checkbox"/> Galvanized <input type="checkbox"/> Copper	X	
Run Offs:	<input type="checkbox"/> Galvanized <input checked="" type="checkbox"/> Aluminum <input type="checkbox"/> Plastic <input type="checkbox"/> Copper <input type="checkbox"/> Tiles <input type="checkbox"/> None		X
Grading:	<input type="checkbox"/> Adequate <input type="checkbox"/> Towards Foundation <input type="checkbox"/> Mix <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Adjoining Towards		X
Siding Type:	<input checked="" type="checkbox"/> Aluminum/Steel <input type="checkbox"/> Vinyl <input type="checkbox"/> Wood <input type="checkbox"/> Stucco <input type="checkbox"/> Brick/Stone Veneer <input type="checkbox"/> Wood Shingle <input type="checkbox"/> Asbestos Shingle <input type="checkbox"/> Wood Composite <input type="checkbox"/> EIFS	X	
Foundation:	<input type="checkbox"/> Block <input type="checkbox"/> Poured <input type="checkbox"/> Brick <input type="checkbox"/> Wood <input checked="" type="checkbox"/> Stone <input type="checkbox"/> Slab	X	
Soffits-Fascia:	<input type="checkbox"/> Wood <input checked="" type="checkbox"/> Aluminum <input type="checkbox"/> Vinyl <input type="checkbox"/> Other	X	
Entry Doors:	<input type="checkbox"/> Wood <input checked="" type="checkbox"/> Metal <input type="checkbox"/> Fiberglass <input type="checkbox"/> Sliding	X	
Windows:	<input checked="" type="checkbox"/> Wood <input type="checkbox"/> Steel <input type="checkbox"/> Vinyl <input type="checkbox"/> Aluminum <input type="checkbox"/> Single Glazed <input checked="" type="checkbox"/> Insulated	X	
Storms:	<input type="checkbox"/> Aluminum Storms <input type="checkbox"/> Vinyl Storms <input type="checkbox"/> Wood Storms <input checked="" type="checkbox"/> None		
Weather Stripping:	<input checked="" type="checkbox"/> Rubber or Vinyl <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Felt or Fiber <input type="checkbox"/> None	X	
Caulking:	<input checked="" type="checkbox"/> Windows <input checked="" type="checkbox"/> Doors <input checked="" type="checkbox"/> Siding Ends <input type="checkbox"/> Other	X	X
Garage:	<input type="checkbox"/> Attached <input type="checkbox"/> Living area above <input checked="" type="checkbox"/> Detached	X	

Comments: Extend the run off drains to carry rain water well away from the foundation. Repair the roof as needed.

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HVAC & Plumbing System

Cooling System:	<input checked="" type="checkbox"/> Air Conditioner	Manufacturer - Trane	Approximate Tons 2
	<input type="checkbox"/> Heat Pump	Model Number - TTX024C100A1	Approximate Age 8
	Manufacturer's Rated Amperage		

	Serviceable	Needs work
A/C - H/P Fins:		
<input type="checkbox"/> Clean and Free of Debris <input checked="" type="checkbox"/> Recommend Cleaning Coils <input type="checkbox"/> Fins are Slightly Damaged <input type="checkbox"/> Bushes Need Trimmed	<input type="checkbox"/>	<input checked="" type="checkbox"/> X
Ext. Coolant Lines:		
<input checked="" type="checkbox"/> Insulated <input type="checkbox"/> Interior Insulation <input type="checkbox"/> Kinked/Damaged	<input checked="" type="checkbox"/> X	<input type="checkbox"/>
Elec. Disconnect:		
<input checked="" type="checkbox"/> Exterior Amps: 30 <input checked="" type="checkbox"/> Interior Amps: 30	<input checked="" type="checkbox"/> X	<input type="checkbox"/>
A/C System Test:		
Temp in: Temp Out: Variance:	<input type="checkbox"/> not tested	<input type="checkbox"/>

Heating System:	Manufacturer Trane	Rated BTU/Hr. 60,000	Approximate Age 8 yrs.
	Type: <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Boiler	Model Number TDD060K36B1	
	Efficiency: <input type="checkbox"/> Low - Under 70% <input type="checkbox"/> 78% <input checked="" type="checkbox"/> 80% <input type="checkbox"/> 90% <input type="checkbox"/> High 92-96%		

Hot Air System:	<input type="checkbox"/> Belt Driven <input checked="" type="checkbox"/> Direct Drive <input type="checkbox"/> Gravity <input checked="" type="checkbox"/> Reasonably Clean <input type="checkbox"/> Dirty	<input checked="" type="checkbox"/> X	
Flue Piping:	<input checked="" type="checkbox"/> Single <input checked="" type="checkbox"/> Double <input type="checkbox"/> PVC Induction Fan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> X	
Distribution System:	<input checked="" type="checkbox"/> Up <input type="checkbox"/> Down <input type="checkbox"/> Horizontal <input type="checkbox"/> Metal Ducts <input type="checkbox"/> Flexible Ducts	<input checked="" type="checkbox"/> X	
Duct System:	% Inside: 10.0% % Outside: 90.0% % Insulated 20.0% % Uninsulated 80.0% Overall leakage @ 25Pa. (100) CFM		
Thermostat:	<input type="checkbox"/> Single <input type="checkbox"/> Multiple <input type="checkbox"/> Multiple Zones <input checked="" type="checkbox"/> Electronic <input checked="" type="checkbox"/> Programmable	<input checked="" type="checkbox"/> X	
Boiler Circulation:	# of Pumps - <input type="text"/> # of Zones - <input type="text"/> Gravity System - <input type="text"/>		
Boiler Controls:	<input type="checkbox"/> High Temp/Pressure Valve <input type="checkbox"/> Limit Switch <input type="checkbox"/> Backflow Preventer		
Main Fuel Shut-off:	<input type="checkbox"/> Electric (N/A) Location: West yard Leak Test -	<input checked="" type="checkbox"/> X	
Electric Units - Non Forced Air	<input type="checkbox"/> Convection Baseboard <input type="checkbox"/> Wall or Recessed Resistance <input type="checkbox"/> Radiant Ceiling/Floor Panel IR Test -		
Thermostat:	Heat 60 ° A/C 80 ° <input checked="" type="checkbox"/> On <input type="checkbox"/> Off Fan <input checked="" type="checkbox"/> Auto <input type="checkbox"/> On		

Water Heater:	Manufacturer Bradford White	Rated BTU/Hr. 40,000	Approx. Age 4 yrs.	Size 40 gals.
	Type: <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Boiler	Model# MI40	Off Status: <input type="checkbox"/> Water <input type="checkbox"/> Gas <input type="checkbox"/> Electric	

HT/P Valve:	<input checked="" type="checkbox"/> Valve is Compatible with System <input type="checkbox"/> Valve is Not Compatible with System	<input checked="" type="checkbox"/> X	
HT/P Pipe:	<input checked="" type="checkbox"/> HT/P pipe OK <input type="checkbox"/> HT/P pipe not OK <input type="checkbox"/> No pipe is installed	<input checked="" type="checkbox"/> X	
Flue Pipe:	<input checked="" type="checkbox"/> Single Walled <input type="checkbox"/> Double Walled <input type="checkbox"/> Plastic (PVC) <input type="checkbox"/> N/A		<input checked="" type="checkbox"/> X
Gas Piping:	<input checked="" type="checkbox"/> Valve On <input type="checkbox"/> Valve Off <input type="checkbox"/> N/A Dirt Leg? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> X	

Comments:	Water heater flue pipe incline should be increased.
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Plumbing

Plumbing System:	Water Source: <input type="checkbox"/> Municipal <input checked="" type="checkbox"/> Private Well	Drainage: <input type="checkbox"/> Municipal Sewer <input checked="" type="checkbox"/> Septic System
Main Supply Pipe:	<input type="checkbox"/> 3/4 inch <input checked="" type="checkbox"/> 1 inch <input type="checkbox"/> Other <input type="checkbox"/> Copper <input checked="" type="checkbox"/> Other	X
Main Shut Off:	<input type="checkbox"/> Basement <input checked="" type="checkbox"/> Utility Room <input type="checkbox"/> Garage <input type="checkbox"/> Crawl Space <input type="checkbox"/> Other	X
Interior Pipes:	<input checked="" type="checkbox"/> Copper <input type="checkbox"/> Plastic (PVC) <input type="checkbox"/> Poly <input type="checkbox"/> PEX <input type="checkbox"/> Galvanized <input type="checkbox"/> Lead	X
Waste Pipes:	<input checked="" type="checkbox"/> Cast Iron <input checked="" type="checkbox"/> Galvanized <input checked="" type="checkbox"/> Lead <input type="checkbox"/> Copper <input checked="" type="checkbox"/> Plastic	X

Electrical Panel

Electrical Service:	Main Service Voltage <input type="checkbox"/> 120 v <input checked="" type="checkbox"/> 120 v/240 v	Drip Loop? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Underground Cable
	Overhead Clearance _____ Feet	Extension Mast? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Exterior wire amps 200
		Serviceable Needs work
Main Distribution Panel:	Accessibility: <input checked="" type="checkbox"/> Average <input type="checkbox"/> Restricted - Maintain 36" free access	
	Main Panel Rated: <input type="checkbox"/> 100 Amps <input type="checkbox"/> 150 Amps <input checked="" type="checkbox"/> 200 Amps <input type="checkbox"/> 60 Amps	X
	Location: <input type="checkbox"/> Basement <input type="checkbox"/> Garage <input type="checkbox"/> Utility Room <input type="checkbox"/> Exterior <input checked="" type="checkbox"/> Other	
Main Service Wire:	<input checked="" type="checkbox"/> Copper <input type="checkbox"/> Aluminum <input type="checkbox"/> Tin Coated Copper	
	Main Service Wire Size 2/0 Compatibility Amperage 200	X
Circuit Wires:	<input checked="" type="checkbox"/> Compatible <input type="checkbox"/> Not Compatible <input type="checkbox"/> Overfused <input type="checkbox"/> Double Taps	X
Type of House Wire:	<input checked="" type="checkbox"/> Conduit <input checked="" type="checkbox"/> Knob & Tube <input checked="" type="checkbox"/> Greenfield <input type="checkbox"/> Romex <input type="checkbox"/> BX Cable	X

Basement and Crawlspace

Foundation Type:	<input type="checkbox"/> Full Basement <input type="checkbox"/> Partial Crawl <input checked="" type="checkbox"/> Multiple Crawls <input type="checkbox"/> Full Crawl <input type="checkbox"/> Walk Out <input type="checkbox"/> Slab	
Drainage:	<input type="checkbox"/> Floor Drain <input type="checkbox"/> Sump Pump <input checked="" type="checkbox"/> None Tested? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Wall Finish:	<input type="checkbox"/> Finished <input type="checkbox"/> Partially Finished <input type="checkbox"/> Paneled <input type="checkbox"/> Drywall <input checked="" type="checkbox"/> Unfinished	
Crawl Space:	<input checked="" type="checkbox"/> Full <input type="checkbox"/> Partial w/Basement <input checked="" type="checkbox"/> Multiple Crawlspace	
	Access - <input type="checkbox"/> Exterior <input checked="" type="checkbox"/> Inner Hatch <input type="checkbox"/> Via Basement <input type="checkbox"/> Access Restricted <input type="checkbox"/> Access Typical	
	Crawlspace entered: yes Tight Space? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Dry <input checked="" type="checkbox"/> Damp <input type="checkbox"/> Wet <input type="checkbox"/>	
Foundation Walls:	<input type="checkbox"/> Cement Block <input type="checkbox"/> Poured Concrete <input checked="" type="checkbox"/> Stone <input type="checkbox"/> Brick	
	<input type="checkbox"/> Piers & Columns <input checked="" type="checkbox"/> Other <input type="checkbox"/> Covered by insulation <input type="checkbox"/> Spot Check	X
Floor:	<input type="checkbox"/> Cement <input checked="" type="checkbox"/> Dirt <input type="checkbox"/> Stone <input checked="" type="checkbox"/> Vapor Barrier <input type="checkbox"/> No Vapor Barrier	X
Drainage:	<input type="checkbox"/> Floor Drain <input type="checkbox"/> Sump Pump <input type="checkbox"/> French Drain <input checked="" type="checkbox"/> None	
Insulation:	<input type="checkbox"/> Between Joists <input checked="" type="checkbox"/> Walls <input type="checkbox"/> Sill <input type="checkbox"/> Ductwork <input type="checkbox"/> None	X
Ductwork:	<input type="checkbox"/> Supply <input checked="" type="checkbox"/> Supply and Return <input type="checkbox"/> Return Insulated? No	X
Ventilation:	<input checked="" type="checkbox"/> Wall Vents <input type="checkbox"/> Power Fan <input type="checkbox"/> Via Basement <input type="checkbox"/> None	X

Comments:

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Interior Rooms

Dishwasher:	None	Manufacturer: Maytag	Approx Age: 15		X	
Refrigerator:	<input checked="" type="checkbox"/> Operable	Age +/-: 10	Power On <input checked="" type="checkbox"/> Off <input type="checkbox"/>			
	Watt hour meter reading		kw used			
Exhaust Fan:	<input checked="" type="checkbox"/> Ceiling	<input type="checkbox"/> Hood	<input type="checkbox"/> Wall	<input type="checkbox"/> None	CFM Actual 250	X
Range/Oven:	<input type="checkbox"/> Built-in	<input checked="" type="checkbox"/> Free Standing	<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Electric	Only gas ovens will be tested for CO.	
Gas Range CO:	CO PPM from CAZ Testing					
Bathroom #1:	<input type="checkbox"/> Master	<input checked="" type="checkbox"/> First Floor	<input type="checkbox"/> Second Floor	<input type="checkbox"/> Other		
	Fan #1 Actual CFM 150	Fan #2 Actual CFM			X	
Bathroom #2:	<input type="checkbox"/> Master	<input type="checkbox"/> First Floor	<input checked="" type="checkbox"/> Second Floor	<input type="checkbox"/> Other		
	Fan #1 Actual CFM 80	Fan #2 Actual CFM			X	
Bathroom #3:	<input type="checkbox"/> Master	<input type="checkbox"/> First Floor	<input type="checkbox"/> Second Floor	<input type="checkbox"/> Other		
	Fan #1 Actual CFM	Fan #2 Actual CFM				
Other Exhaust Fan:	Location:					
	Fan #1 Actual CFM	Fan #2 Actual CFM				
Smoke Detectors:					<input checked="" type="checkbox"/> None	
CO Meters:					<input checked="" type="checkbox"/> None	
Fireplace #1	Type: Wood burning insert	Location: Living room			X	
Fireplace #2	Type:	Location:				
Fireplace #3	Type:	Location:				

Attic

Access:	<input type="checkbox"/> Closet Hatch	<input type="checkbox"/> Hallway Hatch	<input type="checkbox"/> Garage Hatch	<input checked="" type="checkbox"/> Pulldown Stairs	<input type="checkbox"/> Fixed Stairway	<input type="checkbox"/> Other
Ease of Access:	<input type="checkbox"/> Routine	<input type="checkbox"/> Difficult	<input type="checkbox"/> Very Difficult			
Access Hatches	Pull Down Stairs: Width 22" Length 6'	Other: Width	Length			
	Ceiling Scuttle: Width	Length		Other: Width	Length	
Attic Floor Insulation:	Thickness 0.0 Condition: Poor/marginal				X	
	<input checked="" type="checkbox"/> Fiberglass	<input type="checkbox"/> Cellulose	<input type="checkbox"/> Rock Wool	<input checked="" type="checkbox"/> Roll/Batt	<input type="checkbox"/> Loose Fill	
Other Attic Area Floor Insulation:	Thickness 12.0 Condition: Ok				X	
	<input checked="" type="checkbox"/> Fiberglass	<input type="checkbox"/> Cellulose	<input type="checkbox"/> Rock Wool	<input checked="" type="checkbox"/> Roll/Batt	<input type="checkbox"/> Loose Fill	
Other Attic Area Floor Insulation:	Thickness 0.0 Condition:					
	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Cellulose	<input type="checkbox"/> Rock Wool	<input type="checkbox"/> Roll/Batt	<input type="checkbox"/> Loose Fill	
Ventilation:	<input type="checkbox"/> Gable Ends	<input type="checkbox"/> Roof Ridge	<input checked="" type="checkbox"/> Roof Vents	<input type="checkbox"/> None	X	
	<input type="checkbox"/> Roof Turbines	<input checked="" type="checkbox"/> Soffit	<input type="checkbox"/> Power Fan	<input type="checkbox"/> Whole House Fan		
Attic square Feet:	Width 20 Length 25	Width 4 Length 25	Width	Length	Width	Length
	Width 15 Length 20	Width	Length	Width	Length	

Comments: