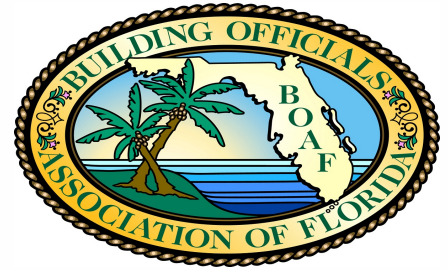


Duct Leakage Test Report

Prescriptive or Performance Method



Permit #:

Job Information

Builder: Community: Lot:

Address: Unit:

City: State: FL Zip:

Duct Leakage Test Results

Prescriptive Method

Performance Method

System 1	_____ cfm25
System 2	_____ cfm25
System 3	_____ cfm25
Sum of any additional systems	_____ cfm25
Total of all systems	_____ cfm25

Prescriptive Method cfm25 (Total)

To qualify as "substantially leak free" Qn must be less than or equal to 0.04 if air handler unit is installed. If air handler unit is not installed, Qn Total must be less than or equal to 0.03. This testing method meets the requirements in accordance with Section R403.2.2

Performance Method cfm25 (Out or Total)

To qualify as "substantially leak free" Qn must not be greater than the proposed duct leakage Qn specified on Form R405-2014

Leakage Type selected
on Form R405-2014
(Energy Calc)

Qn specified on Form
R405-2014 (Energy Calc)

_____ ÷ _____ = _____ Qn
Total of all systems Total Conditioned Square Footage

PASS

FAIL

Testing Company

Company Name: Phone:

I hereby verify that the above duct leakage testing results are in accordance with the Florida Building Code requirements with the selected compliance path as stated above, either the Prescriptive Method or Performance Method.

Date of Test:

Signature of Tester:

Printed Name of Tester:

License/Certification #: Issuing Authority: