**New Mexico Energy$mart Program**

**Agency**

**WEATHERIZATION FINAL INSPECTION REPORT**

|  |  |
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| File No. \_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_ | Client Name |
| Address |
|  |

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| **INSPECTION INFORMATION** | **FINAL INSPECTION****PASS FAIL N/A** | **COMMENTS OR****DESCRIBE REWORK** | **PASSES****REINSPECTION** | **State****Standards****Section** |  **SWS Section** |
| **AIR SEALING** |  |  |  |  |  | 4000 | Section 3 |
| Gross Air Sealing |  |  |  |  |  | 4100 | Section 3 |
| Interior Caulking |  |  |  |  |  | 4000 | 3.11-3.15 |
| Exterior Caulking |  |  |  |  |  | 4000 | 3.10-3.19 |
| Door Weatherstrip |  |  |  |  |  | 6320 | 3.1201.3 |
| Door Sweeps |  |  |  |  |  | 6320 | 3.1201.3 |
| Thresholds |  |  |  |  |  | 6320 | 3.1201.3 |
| Outlet Gaskets |  |  |  |  |  | 4000 | NA |
| Attic Air Sealing |  |  |  |  |  | 4200 | 3.1001-3.1005 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  **SIR Energy Saving HEATING, COOLING SYSTEMS** |  |  |  |  |  | 7000 | Section 5 |
| Cooling System Replacement/Repair |  |  |  |  |  | 7500 | 5.300, 5.3002, 5.3003, 5.3302, |
| Solid Fuel ApplianceRepair/Replacement |  |  |  |  |  | 7470 | 2.0201.2f |
| Duct Repair/Sealing |  |  |  |  |  | 7600 | 3.16 |
| ThermostatReplacement |  |  |  |  |  | 7220 | 5.3003.9,5.3003.11 |
| Cleaning/TuningInspection |  |  |  |  |  | 7220 | 5.3003 |
| Flexible Gas Lines |  |  |  |  |  | 7340 | 2.0201 |
| Heating System Replacement/Repair |  |  |  |  |  | 8410 | 2.0201.2, 2.0202, 2.0203, 5.300, 5.3002, 5.3003 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| **BASELOAD** |  |  |  |  |  | 9000 |  |
| Water Heater Insulation |  |  |  |  |  | 9140 | 7.8102.2i,n |
| Pipe Insulation |  |  |  |  |  | 9120 | 7.8102.2i,n |
| 1.5 GPM ShowerHead/ Water @120 degrees |  |  |  |  |  | 9160 | 7.801.1,7.801.2 7.8102.2k,n |
| Aerators |  |  |  |  |  | 9160 | 7.801.1, 7.801.2 |
| Refrigerator |  |  |  |  |  | 9300 | 7.8001.1 |
| Light Bulbs (LEDs) |  |  |  |  |  | 9400 | 7.8003.1b, 7.8003.11 |
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| **INSPECTION** **INFORMATION** | **FINAL INSPECTION****PASS FAIL N/A** | **COMMENTS OR****DESCRIBE WORK** | **PASSES** **REINSPECTION** | **State****Standards****Section** | **SWS Section** |
| **INSULATION** |  |  |  |  |  | 5000 | Section 4 |
| Attic Insulation |  |  |  |   |  | 5200 | 4.1 |
| Attic Hatch Installation |  |  |  |  |  | 5250 | 4.1006.1, 4.1006.2 |
| Wall Insulation |  |  |  |  |  | 5300 | 4.11 |
| Floor /Belly Insulation |  |  |  |  |  |  5400 | 4.13 |
| Knee wall insulation |  |  |  |  |  | 52120 | 4.1004.2 |
| Cantilevered floor insulation |  |  |  |  |  | 5200 | 4.1301.5 |
| Vapor Barrier |  |  |  |  |  |  | 2.0403 |
| **WINDOW /STORM WINDOWS** |  |  |  |  |  |  |  |
| Windows Caulking |  |  |  |  |  | 6000 | 3.1201.2, 3.1201.5, 3.1201.7 |
| Window Repairs |  |  |  |  |  | 6000 | 3.1201.2, 3.1201.5, 3.1201.7 |
| Storm Window Replacement |  |  |  |  |  | 6000 | 3.1201.6 |
| Windows Replacement |  |  |  |  |  | 6000 | 3.1203.1, 3.1203.2, 3.1203.4 |
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|  |  |  |  |  |  |  |  |
| **INCIDENTAL REPAIRS** |  |  |  |  |  |  |  |
| Door Replacement/repair |  |  |  |  |  | 6300 | 3.1203.3, 3.1203.5 |
| Glass Replacement/Repair |  |  |  |  |  | 6140 | 3.1202 |
| Room to room pressure balance |  |  |  |  |  | 4300 |  |
|  |  |  |  |  |  |  |  |
| **HEALTH & SAFETY** |  |  |  |  |  |  | Section 2 |
| Mechanical Ventilation  |  |  |  |  |  | 3900 | Section 6 |
| Test Cooking Range |  |  |  |  |  | 3200,9200 | 2.0201.2d, e |
| Furnace Filter Installation |  |  |  |  |  | 7220 | 5.3003.12 |
| Gas LeakInvestigation |  |  |  |  |  | 12830 | 2.0201 |
| Heating System Replacement/Repair |  |  |  |  |  | 7410 | 2.0201.2, 2.0202, 2.0203, 5.300, 5.3002, 5.3003 |
| Water Heater Replacement/Repair |  |  |  |  |  | 9100 | 7.8102, 2.0203 |
| Heater/Vent Corrections & Clearances |  |  |  |  |  | 7310 | 2.0203, 5.3003.3 |
| CO Alarms |  |  |  |  |  | 31100, NFPA 720 | 2.0201.2c, 2.0301.2 |
| Smoke Detectors |  |  |  |  |  | 31200, NFPA 72 | 2.0301.1 |
| Dryer Vent |  |  |  |  |  | 3813 | 6.6.005.4 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| **Required Testing** |  | **Blower Door CFM** | **Comments** | **ASHRAE Fan CFM** |  |  |
| Pre-Retrofit |  |  |  |  |  |  |
| Target |  |  |  |  |  |  |
| Final |  |  |  |  |  |  |
| MFA inspection  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  | **FINAL INSPECTOR’S CHECKLIST** |  |
|  | □ Re-work orders filled out, signed and in File |  |
|  | □ Reviewed daily test-out sheets |  |
|  | □ Reviewed NEAT/MHEA input report and recommended measures |  |
|  | □ Work Order match the completed work? |  |
|  | □ Completed Final Inspection Diagnostics |  |
|  | □ All permits in File, state inspection completed \_\_\_\_\_\_\_\_\_\_date of request |  |
|  | □ All local and state codes followed |  |
|  | □ Evidence that all OSHA and health and safety protocols were met |  |
|  | □ Work completed as intended (see Work Order) + Recommended Measure Report |  |
|  | □ New materials and finishes match adjacent materials and finishes |  |
|  | □ All materials used compliant with SWS and 10 CFR 40 Appendix A |  |
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| --- | --- |
|  | □ All manufacturer’s warranties delivered to client |
|  | □ No damage to existing trim and/or items in home |
|  | □ Exterior wood trim and doors finished 6 sides |
|  | □ Was job site left clean? Yes \_\_\_\_\_ No \_\_\_\_\_ |
|  | □ Was client education carried out? Yes \_\_\_\_\_ No \_\_\_\_\_ |

Client Signature indicates satisfaction with work.

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Client Signature Date

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Inspector Signature for Re-Work Date

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Certified Quality Control Inspector Signature - Final Date