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| **File Number:** |  | **Customer:** |  |
| **Agency Auditor:** |  |  |  |
| **Agency QCI Inspector:** |  | **State QCI Inspector:** |  |
| **Agency QCI Signature:** |  | **State QCI Signature:** |  |
| **Agency QCI Inspector Certification Number:** |  | **State QCI Inspector Certification Number:** |  |
| **Date of Full Audit Review:** |  | **Date of Full Audit Review:** |  |

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| **Yes** |  **No** | **Clients**  | **Description (If needed)** |
|  |  | Number of occupants matches Referral or number documented living in home. |  |
|  |  | Dwelling type correct |  |
|  |  | Primary and Secondary fuel types correct |  |
| **Yes** |  **No** | **Audit Information**  | **Description (If needed)** |
|  |  | Correct cost libraries selected |  |
|  |  | Conditioned number of stories correct |  |
|  |  | Conditioned square feet correct |  |
|  |  | NEAT/MHEA Audit in File |  |
| **Yes** |  **No** | **Walls** | **Description (If needed)** |
|  |  | N-S and E-W walls square feet match and are reasonable |  |
|  |  | Existing wall components and insulation levels match field data collection |  |
|  |  | Correct “added insulation” type selected |  |
| **Yes** |  **No** | **Windows** | **Description (If needed)** |
|  |  | Existing window components and orientation matches field data collection |  |
|  |  | Reasonable exterior shading and leakiness values selected |  |
|  |  | Window dimensions match field data collection |  |
|  |  | Windows modeled for replacement meet program specifications and documentation provided |  |
| **Yes** |  **No** | **Doors** | **Description (If needed)** |
|  |  | Existing door components and cardinal direction match field data collection |  |
|  |  | Reasonable storm door condition and leakiness selected; orientations match field data collection |  |
| **Yes** |  **No** | **Unfinished Attics** | **Description (If needed)** |
|  |  | Attic(s) square footage reasonable for overall building dimensions |  |
|  |  | Existing attic(s) components and insulation levels match field data collection |  |
|  |  | Correct “added insulation” type selected |  |
| **Yes** |  **No** | **Finished Attics** | **Description (If needed)** |
|  |  | Attic(s) square footage reasonable for overall building dimensions |  |
|  |  | Existing attic(s) components and insulation levels match field data collection |  |
|  |  | Correct “added insulation” type selected |  |
|  |  | All four components of a finished attic are modeled unless field data indicates otherwise |  |
| **Yes** |  **No** | **Foundations** | **Description (If needed)** |
|  |  | Foundation(s) square footage reasonable for overall building dimensions |  |
|  |  | Existing foundation(s) components and insulation levels match field data collection |  |
|  |  | Correct foundation type selected |  |
|  |  | Correct “added insulation” type selected |  |
|  |  | Proper foundation Conditioned Selected? |  |
| **Yes** |  **No** | **Heating** | **Description (If needed)** |
|  |  | All heating systems (Primary & Secondary) are accounted for and part of the model  |   |
|  |  | Existing heating system testing, fuel, condition and location match field data collection |  |
|  |  | Replacement system information is accurate (AFUE, Cost, etc.)  |  |
|  |  | If secondary heating systems present, “heat supplied” breakdown is reasonable |  |
|  |  | Heat Loss Calculation/Manual J completed and in file |  |
| **Yes** |  **No** | **Ducts/Infiltration** | **Description (If needed)** |
|  |  | “Before Wx” CFM50 reading matches field data collection |  |
|  |  | “After Wx” CFM50 target reasonable |  |
|  |  | Infiltration reduction cost reasonable |  |
| **Yes** |  **No** | **Water Heating** | **Description (If needed)** |
|  |  | Existing equipment information, fuel, and location match field data collection |  |
|  |  | Replacement water heater selected is correct model and correct fuel selected |  |
| **Yes** |  **No** | **Refrigerators** | **Description (If needed)** |
|  |  | Existing equipment information, and location match field data collection |  |
|  |  | Replacement refrigerator selected is correct size |  |
| **Yes** |  **No** | **Misc. Measures** | **Description (If needed)** |
|  |  | All repairs modeled reasonable and justified |  |
|  |  | All H&S modeled reasonable and justified |  |
|  |  | All identified costs (CFL/LED bulbs, flow restrictors, etc.) are entered |  |
| **Yes** |  **No** | **File Audit Review (complete, accurate)**  | **Description (If needed)** |
|  |  | Energy Audit Form  |  |
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|  |  | Audit vs Work Order |  |
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|  |  | Work Order |  |
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|  |  | Change Order |  |
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|  |  | Ventilation and Your Home |  |
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|  |  | Health & Safety Forms |  |
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|  |  | Pre & Post RED Calc |  |
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|  |  | Sign-Offs |  |
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|  |  | Invoices |  |
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|  |  | SHPO, Lead |  |
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|  |  | Vermiculite, Radon |  |
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|  |  | WAMS Reporting |  |
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| Job-Specific Comments/Concerns |
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