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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 | |  |
|  |
|  |  | Work Order | |  |
|  |
|  |  | Change Order | |  |
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|  |  | Ventilation and Your Home | |  |
|  |
|  |  | Health & Safety Forms | |  |
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|  |  | Pre & Post RED Calc | |  |
|  |
|  |  | 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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