



Monroe County Building Department

<http://fl-monroecounty.civicplus.com/149/Building-and-Permitting>

BLOWER DOOR TEST FORM

Permits applied for on or after July 1st, 2017 will require Blower Door Testing. This applies to NEW CONSTRUCTION, ADDITIONS, or any ALTERATIONS (300 sq. ft. or greater) involving the building thermal envelope per FBC Existing Building 6th Edition 2017. Affected building types include Residential 1 and 2 Family Dwellings & Townhouses as well as R - 2, R - 3, and R - 4 Multi-Family dwellings up to 3 stories.

Blower Door Test is to be conducted AFTER all penetrations of the building thermal envelope and immediately BEFORE Building Final Inspection (199).

This form reporting the test results shall be signed by the party conducting the test.

JOB INFORMATION:

Permit #

Date:

Contractor Name:

Job Address:

City, State, Zip:

Phone #:

Email:

AIR INFILTRATION TEST RESULTS:

CFM (50) =

Volume =

$ACH(50) = CFM(50) \times 60 / Volume =$

Pass (7 ACH(50) or less)

Fail

Mechanical ventilation has been added

CERTIFICATION OF TEST RESULTS

R402.4.1.2 Testing. The building or dwelling unit shall be tested and verified as having an air leakage rate of not exceeding 7 air changes per hour in Climate Zones 1 and 2, 3 air change per hour in Climate Zones 3 through 8.

Testing shall be conducted with a blower door at a pressure of 0.2 inches w.g. (50 Pascals).

Testing shall be conducted by either individuals as defined in Section 553.993(5) or (7), F.S. or individuals licensed as set forth in Section 489.105(3)(f),(g),(h),(i) or an approved third party.

Testing shall be performed at any time after creation of all penetrations of the building thermal envelope.

AUTHORIZED THIRD PARTY:

I hereby certify the above results and that I hold the below certification:

Class A or B A/C Mechanical Contractor License #:

RESNET approved HERS Rater Residential Field Inspector Certification #:

BPI approved Building Analyst Energy Auditor Certification #:

Professional Engineer License #:

Authorized Third Party Signature:

Print Name

Rec'd By:

Date: