



## HERNANDO COUNTY BUILDING DIVISION

PERMITTING ♦ CONTRACTOR LICENSING

789 PROVIDENCE BOULEVARD ♦ BROOKSVILLE, FLORIDA 34601 ♦ [www.HernandoCounty.us](http://www.HernandoCounty.us)

PHONE 352.754.4050 ♦ FAX PERMITTING 352.754.4416 ♦ FAX CONTRACTOR LICENSING 352.754.4159

# **\*NOTICE\***

## **Re: Blower Door Testing and Mechanical Ventilation (Required for permits submitted July 1, 2017 and after)**

The Fifth Edition of the Florida Building Code (FBC) requires blower door testing (BDT) for all residential dwelling units. This would include single family houses, town houses, duplexes, and **each** condominium and apartment unit where the building is three stories or less. The FBC further requires mechanical ventilation if the blower door test has a result of less than three (3) air changes per hour (ACH), and the Energy Code requires that the ACH be three or less, thus mechanical ventilation is now required in all the above referenced dwelling units. The purpose of this bulletin is to provide direction on who can perform the testing, what needs to be submitted to the Building Division (BD), and when it needs to be submitted.

**\*NOTE:** Test results of three (3) to seven (7) do not require mechanical ventilation. Above seven (7) ACH's, BDT fails.

### **Individuals who can conduct the test include:**

- 1. Individuals defined under FS 553.993 (5) or (7)**
  - **Energy Rater or Residential Field Inspector currently certified through RESNET**
  - **Energy Auditor, Infiltration and Duct Leakage Technician or Building Analyst currently certified through BUILDING PERFORMANCE INSTITUTE**
- 2. Individuals licensed under FS 489.105(3)(f), (g) or(i);**
  - **Class A Air Conditioning Contractor**
  - **Class B Air Conditioning Contractor**
  - **Mechanical Contractor**
- 3. Individuals approved by the Building Official after providing proof of qualifications;**

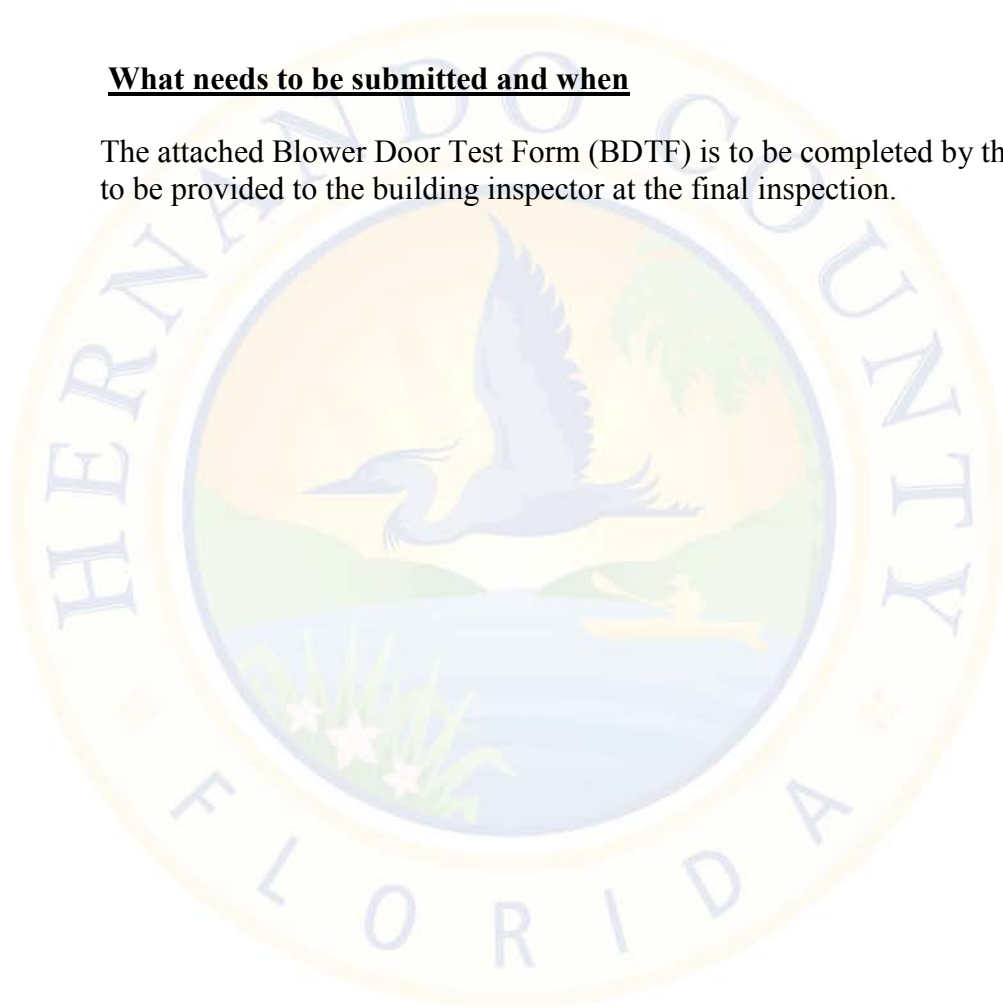
**Blower Door Testing reports performed by 3<sup>rd</sup> Party Agency shall be signed by a qualified individual and submitted to the building department prior to issuance of Certificate of Occupancy.**

**To be an approved 3<sup>rd</sup> Party Agency in Hernando County, you must first register with the Building Department, showing proof of licensure and/or certification as shown above and provide proof of liability insurance, workman's compensation insurance or exemption and proof of Business Tax Receipt for the agency.**

If you wish to be approved, please email your qualifications to [kbrady@hernandocounty.us](mailto:kbrady@hernandocounty.us). Once approved they will email you a **BDT** number to be used when completing the blower door test form. Please note, the BDT number is issued to an individual, not a company. The person with that number is the one that must perform the test. If a company has more than one person that will be performing tests, all those performing tests must be registered. We will try to make the registration process as quick and painless as possible.

**What needs to be submitted and when**

The attached Blower Door Test Form (BDTF) is to be completed by the approved tester. The BDTF is to be provided to the building inspector at the final inspection.





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Permit #: \_\_\_\_\_

## Blower Door Test Form

For Prescriptive and Performance Method

### Job Information

Builder: \_\_\_\_\_

Community: \_\_\_\_\_ Lot #: \_\_\_\_\_

Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

### Air Infiltration Test Results

CFM (50) = \_\_\_\_\_

Volume = \_\_\_\_\_

ACH (50) = CFM (50) X 60 / Volume = \_\_\_\_\_ ACH.

Pass

Fail (more than 7 ACH)

**Passing results of 3 – 7 ACH, does not require mechanical ventilation. Less than 3 ACH will require mechanical ventilation.**

### 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. Testing shall be conducted with a blower door at a pressure of 0.2 inches w.g. (50 Pascals). Where required by the *code official*, testing shall be conducted by an *approved* third party. A written report of the results of the test shall be signed by the party conducting the test and provided to the *code official*. Testing shall be performed at any time after creation of all penetrations of the *building thermal envelope*.

#### Authorized Third Party

I hereby certify that the above Air Infiltration Test results demonstrate compliance with Florida Energy Code requirements in accordance with the Florida Building Code-Energy Conservation R402.4.1.2 5<sup>th</sup> Edition (2014).

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Company: \_\_\_\_\_ BDT #: \_\_\_\_\_