

# Residential Florida Energy Code Request Form

Detailed Blueprints and specifications *must* accompany this request, to include scaled blue prints, window/door schedule and heights of all tray/cathedral ceilings.

Please allow 7-10 working days for completion of code form.

\*\*\* An incomplete request will constitute a delay. \*\*\*

Please fill out separate request for Carriage House/Guest House if completely detached.

Lot \_\_\_ Block \_\_\_ Subdivision \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_

Is this an exact duplicate of a house plan we have ran a calculation on before? Yes, Lot \_\_\_ Block \_\_\_ Sub \_\_\_\_\_ or No

Front of house faces: N S E W NE NW SE SW

Square Footage (heated and cooled) \_\_\_\_\_

New Construction \_\_\_ Addition \_\_\_ or Remodel/Renovation \_\_\_

CHLECO provides free Energy Code calculations for properties within our service territory. For paid assistance with Energy Code forms for any other properties, please contact Southland Utilities at (850) 307-1183.

Receiving CHELCO office \_\_\_\_\_ Date \_\_\_\_\_

Date Received in Marketing \_\_\_\_\_

Date Sent from Marketing \_\_\_\_\_

So# \_\_\_\_\_ Marketing Rep \_\_\_\_\_

Builder/Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_

Homeowner \_\_\_\_\_

Phone \_\_\_\_\_

**THIS FORM MUST BE COMPLETED BEFORE AN ENERGY CODE CALCULATION WILL BE PERFORMED BY CHELCO**

Fill in blanks and/or circle the best possible description of the feature to be installed in the home.

<b>FLOOR</b>	1 <sup>ST</sup> FLOOR SQ FT _____	2 <sup>ND</sup> FLOOR SQ FT _____	3 <sup>RD</sup> FLOOR SQ FT _____	
	Ceiling Height: _____	Ceiling Height: _____	Ceiling Height: _____	
	Slab	Raised Floor	Crawl-Space	R-Value _____
	Insulation Between Floors	YES NO	Fiberglass Cellulose Foam Other _____	R-Value _____

<b>ATTIC INSULATION</b>	Fiberglass	Cellulose	Foam	Other _____	R-Value _____
-------------------------	------------	-----------	------	-------------	---------------

<b>ROOF</b>	Roof Color _____	Shingle	Metal	Tile	Concrete	Other _____	Attic Radiant Barrier	Roof Pitch
		Yes	No					

<b>WALL INSULATION</b>	R11, R13, R15, R19, or R _____	2X4 or 2X6	Fiberglass	Cellulose	Foam	Other _____	Wall Sheathing
							R-Value - _____ Type _____

<b>EXTERIOR WALL TYPE</b>	Brick	Block	Wood	ICF	Other _____
---------------------------	-------	-------	------	-----	-------------

<b>WINDOW FRAME TYPE</b>	Double pane or Single pane	Storm	Impact	Low E	Tint	U-Value _____ SHGC _____
	Vinyl, TIM, Wood, or Metal					

<b>DOOR</b>	Wood	Insulated	Storm Door	YES	NO

<b>ATTIC VENTILATION TYPE</b>	YES	NO	Ridge	Soffit	Mechanical Ventilation/Power Fan
					CFM (if fan) _____

<b>WATER HEATER(S)</b>	Efficiency rating(s) _____	_____ Gallons	Electric	Heat Recovery Unit	Water Heater Location
	Total units _____	_____ Tankless	Natural Gas	YES NO	Interior Exterior Garage
			Propane		
			Heat Pump		

<b>HVAC</b>	Air to Air Heat Pump	Geothermal	Mini Splits	Dual Fuel	SEER _____
	Total units _____	Furnace type: Propane	Natural Gas	Heat Pump	AFUE _____

<b>Air-handler Location</b>	Interior	Attic	Garage	Outdoors
-----------------------------	----------	-------	--------	----------

<b>Duct System Location</b>	Supply	Return	Programmable Thermostat
	Conditioned Unconditioned	Conditioned Unconditioned	Yes No