For Office Use Only

Application Date

Permit	Number
i cinit	number



Community Development Department

18400 Murdock Circle, Port Charlotte, FL 33948 Building Phone: 941.743.1201 | Building Fax: 941.764.4907 Zoning Phone: 941.743.1964 | Zoning Fax: 941.743.1598 BlowerDoorReports@CharlotteCountyFL.gov www.CharlotteCountyFL.gov

CSR Initials

20

ENVELOPE LEAKAGE TEST REPORT (Blower Door Test) Florida Building Code 8th Edition (2023)

CONTRACTOR'S NAME:

PERMIT NUMBER:

PROJECT ADDRESS:

PROJECT ADDRESS:		
	Number & Street	City, State, & Zipcode
Air Leakage Test Results	Passing results must meet ei	ither the Performance, Prescriptive, or ERI Method
air changes per hour at a p	preassure of 0.2 inc w.g. (50 Pascals) od - The building or dwelling unit sh	nall be tested and verified as having an air leakage rate of not
infiltration, sub-section AC		5-2023 (Performance) or R406-2023 (ERI), section labeled as
	n Form R405-2023 Enerfy Calc (Perfo	rmance) or R406-2023 (ERI):
		Method of calculating building volume:
X 60 ÷	=	Retrieved from architectural plans
CFM(50) Building	g Volume ACH(50)	Code Software calculated
[PASS	Field measured and calculated
🔲 When ACH (50) is less that	n 3, mechanical installation must be	verified by building department.
 During testing: Exterior windows and doors, fire control measures. Dampers including exhaust, intercontrol measures. Interior doors, in installed at the 4. Exterior doors for continuous vers. Heating and cooling systems, if 6. Supply and return registers, if in 	eplace and stove doors shall be closed, ake, makeup air, backdraft and the flue	e turned off.
Testing Company: Company Name:		Phone Number:
Email:		Hone Number.
Address:		
	Number & Street Leakage results are in accordance with ompliance method selected above.	City, State, & Zipcode the 2023 8th Edition Florida Building Code, Energy Conservation
Signature of Rater:		Date of Test:
Printed Name of Rater:		
License/Certification Number	:	Issuing Authority: