

INSULATION CERTIFICATE

Building Number: _____

Number and Street: _____ **City:** _____ **Zip:** _____

Weatherization Agency: _____

1. ROOF

Insulation Type: _____ Brand Name: _____
Thickness added (inches): _____ Thermal resistance added (R-Value): _____
Total Thermal Resistance (R-Value): _____ Insulated area: _____ ft²

2. CEILING

Dense pack: Loose fill:

Insulation Type: _____ Brand Name: _____
Thickness added (inches): _____ Thermal resistance added (R-Value): _____
Total Thermal Resistance (R-Value): _____ Insulated area: _____ ft²

Manufacturers installed weight per square foot to achieve Thermal Resistance (R-Value): _____

3. EXTERIOR WALL

Cavity frame type: 2"x4" 2"x6" Dense pack: Loose fill:

Other: _____

Insulation Type: _____ Brand Name: _____
Thermal resistance added (R-Value): _____ Total Thermal Resistance (R-Value): _____
Insulated area: _____ ft²

4. FLOOR

Insulation Type: _____ Brand Name: _____
Thickness added (inches): _____ Thermal resistance added (R-Value): _____
Total Thermal Resistance (R-Value): _____ Insulated area: _____ ft²

5. RIM JOIST (Perimeter)

Insulation Type: _____ Brand Name: _____
Thickness added (inches): _____ Thermal resistance added (R-Value): _____
Total Thermal Resistance (R-Value): _____ Insulated area: _____ ft²

6. FOUNDATION WALL

Insulation Type: _____ Brand Name: _____
Thickness added (inches): _____ Thermal resistance added (R-Value): _____
Total Thermal Resistance (R-Value): _____ Insulated area: _____ ft²

I, _____ CERTIFY THAT THE RESIDENCE IDENTIFIED ABOVE WAS INSULATED AS SPECIFIED ON THIS CERTIFICATE AND THE INSTALLATION WAS CONDUCTED IN CONFORMANCE TO APPLICABLE CODES, WEATHERIZATION STANDARDS AND PROGRAM REGULATIONS.

_____	_____	_____	_____
Item #s	Signature	Date	Installing Subcontractor or Wx Subgrantee
_____	_____	_____	_____
Item #s	Signature	Date	Installing Subcontractor or Wx Subgrantee
_____	_____	_____	_____
Item #s	Signature	Date	Installing Subcontractor or Wx Subgrantee