

## **Prescriptive Duct Sealing Form**

## This installation form may be <u>required</u>. Check with your local utility to determine individual requirements, as they may vary.

- 1. If the utility <u>does not</u> require registry entry, complete and submit this installation form. Check with the customer utility for additional requirements.
- 2. If the utility <u>does require</u> registry entry, enter all data on a mobile device or computer at <u>ptcs.bpa.gov</u> using the certified technician's account. Print the Registry Installation Report. Note: This form can be filled out for later entry online. Issues entering data? Submit this form for entry:
  - Customers of Bonneville Power Administration utilities can email <u>ResHVAC@bpa.gov</u>, fax to 1.877.848.4074 or call 1-800-941-3867.
  - Customers of Portland General Electric or Pacific Power can email <u>Residentialforms@energytrust.org</u> or call 1.866.365.3526.

## **Site Information**

PTCS tech #	PTCS tech	Install date	Electric		
Installation	name	Site	utility	Site	Site
site address		city		state	zip
Home type: Exis	ting site built	1 2 3	Heated are	ea:	Sq Ft
Foundation type (site	built):  Crawlspace  Full basement  I	Halfbasement 🗌 Slab			
🗌 Natural gas furnad	m: w/out AC	Other non-electric s	pace heating		eat pump
# Supply		# Returns			
	. Ducts are considered to be in uncondition s are considered conditioned space. Bel lies				:s and unheated
Qualifying Character	istic Selectone.	ne supply ducts are in un perating pressure leaks i			
Installation Che	All work must be completed t	o the Prescriptive Duct Sec	aling Specifi	cation found at <u>bpa.</u>	
<u>Duct Repai</u> r					
Select all issues tha	<b>t apply:</b> 🗌 No repairs done 🗌 Large gap	s in sheet metal 🔲 Rus	sted portio	ns 🗌 Missing sec	tions
Metal duct connect	t <b>ions:</b> 🗌 No metal ducts present <u>OR</u> 🗌 A	ll are fastened (e.g. 3 me	etal screws a	ateach connection v	vhere required)
Flex duct connection	ons: 🗌 No flex ducts present <u>OR</u> 🗌 All fl	ex ducts are joined to a	section of	rigid duct of matc	hing diameter
Flex duct liners:	No flex ducts present $ {\rm OR}  \square $ Interior and	exterior liners of flex d	uctconnec	tions are secured	
Duct Support and C	Connections				
Duct support:	Ducts did not require support OR 🗌 Duc	t supports were added			
Ground contact:	] Ducts do not contact ground <u>OR</u> 🗌 Clos	ed-cell rigid insulation i	sunderthe	e ducts to prevent	contact
Boots are mechani	cally fastened to the subfloor or respective	esurface: 🗌 Y 🗌 N	lf no, the p	oroject will fail.	
Duct Sealing: All ac	cessible portions of the duct which require	e sealing are sealed wit	h approved	materials.	
	g insulation off where opportunities exist. E /dovetail joints; branch T's, Y's and L's; duc	•			
□ Y □ N <i>If no, t</i>	he project will fail.				
Return was (select	one):   Sealed <u>OR</u> In conditioned sp	ace and not sealed OR	□ Not ac	cessible and not s	ealed <u>OR</u>
	Was not sealed but is accessible				

Duct Insulation         Existing duct insulation was re-installed       OR         Ducts were not insulated       OR         New insulation was installed	
Manufactured Homes Select all that apply:          Belly was accessed       Cross-over repairs were made       New cross-over was installed       End caps installed and sealed	

## **Combustion Appliance Zone (CAZ)**

Check for common CAZ devices, such as fireplaces, wood stoves, gas furnaces, and gas water heaters.

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A CO detector installed in the home is **required** in all cases where a sealed or non-sealed combustion appliance is located in a conditioned space or attached structure i.e. garage. RECOMMENDED CO detector specifications: UL 2034/CSA 6.19-01, digital display, peak CO memory and recall.

Notes