

HOMEOWNER _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DESCRIPTION OF INSTALLATION

1. ROOF DECK (INTERIOR/EXTERIOR)

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

2. ATTIC FLOOR

Batt or Blanket _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

Loose Fill Type _____ Product Name _____

Contractor's min installed weight/ft² _____ lb. Minimum thickness _____ inches

Manufacturer's installed weight per square foot to achieve Thermal Resistance (R-Value) _____

3. EXTERIOR WALL

Frame Type _____

A. Cavity Insulation

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

B. Exterior Foam Sheathing

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

4. INTERIOR WALL (ACOUSTICS)

Material _____ Product Name _____

Thickness (inches) _____

5. RAISED FLOOR

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

6. SLAB FLOOR/PERIMETER

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

Perimeter Insulation Depth (inches) _____

7. FOUNDATION WALL

Material _____ Product Name _____

Thickness (inches) _____ Thermal Resistance (R-Value) _____

INSULATION CONTRACTOR SIGNATURE _____ DATE _____

COMPANY _____ ADDRESS _____ PHONE _____

HOME BUILDER SIGNATURE _____ DATE _____

COMPANY _____ ADDRESS _____ PHONE _____