



**HOME PERFORMANCE UPGRADE CHECKLIST**  
**NEW DUCT SYSTEM INSTALL**

SunState Account# \_\_\_\_\_

<b>MATERIALS</b>	Type(s) of new duct work installed: <input type="checkbox"/> Flex Duct <input type="checkbox"/> Duct Board <input type="checkbox"/> Rigid Metal
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<b>AIR LEAKAGE</b>	<input type="checkbox"/> Mastic applied to all collars & connectors and over the exterior of the inner liner of flex duct <input type="checkbox"/> Mastic applied to all plenum connections at air handler unit <input type="checkbox"/> All boots & boxes sealed to interior finish (with mastic, gasket or caulk) <input type="checkbox"/> Wall cavities are not used as duct work <input type="checkbox"/> Filter cover at air handler makes a complete seal <input type="checkbox"/> All seams at air handler unit are sealed with UL181 tape and mastic <input type="checkbox"/> Access panels at air handler are sealed with UL181 tape
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<b>AIR FLOW</b>	<input type="checkbox"/> No excessive kinks, compression or sharp bends in flex duct <input type="checkbox"/> No flex duct installed in cavities or locations that are less than the outer diameter of the flex duct <input type="checkbox"/> All bedrooms have a return air path installed (select all present methods) <input type="checkbox"/> Ducted Return <input type="checkbox"/> Transfer Grille <input type="checkbox"/> Jump Duct <input type="checkbox"/> All bedrooms & offices are less than a 3.0 pascal pressure differential to the main area of the home
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POST-INSTALLATION DIAGNOSTICS				
System #1	Tonnage:	Locations	AHU:	Ducts:
Total Leakage (CFM)		Supply:	Return:	Average:
		% of System Flow:		
System #2	Tonnage:	Locations	AHU:	Ducts:
Total Leakage (CFM)		Supply:	Return:	Average:
		% of System Flow:		
Room	Air Flows		Room	Air Flows
Total External Static Pressure:    #1:                      "WC                      #2:                      "WC				

The contractor has answered all questions regarding the checklist. I understand the checklist is NOT a guarantee of quality or performance but a guide to ensure key items have been addressed and discussed.	
Technician:	Date:
Sign	Print
Homeowner:	Date:
Sign	Print