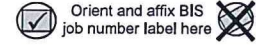




# TR8: Technical Report Statement of Responsibility for Energy Code Progress Inspections



This form must be typewritten

## 1 Location Information (required for all applications)

House No(s) 828

Street Name Midwood Street

BIN No(s) 3323071

Work on Floor(s) FAC, ROF

## 2 Applicant Information (required for all applications)

Choose all that apply: ☒ Design Applicant 3A, 4 ☒ Progress Inspections Applicant 3B-D, 5-6

Last Name Stahl

First Name Robert

Middle Initial J

Business Name Robert J. Stahl Architect, P.C.

Business Phone (914) 251-0900

Business Address 75 North Central Avenue, Suite #302

Email Address robert@rjstahlsrchitect

City Elmsford

State NY

Zip 10523

Mobile Telephone

License Type (choose one): ☐ P.E. ☒ R.A.

License Number 019014

## 3 Energy Code Progress Inspection (required for applications where Energy Code Compliance Progress Inspection is marked 'Yes' on TR1)

| 3A Identification of Requirement |                                     |                                                       | 3B Identification of Responsibilities | 3C Certificate of Complete Inspections/Tests | 3D Withdraw Responsibilities |
|----------------------------------|-------------------------------------|-------------------------------------------------------|---------------------------------------|----------------------------------------------|------------------------------|
| Y                                | N                                   | Progress Inspections                                  | Initial & Date                        | Initial & Date                               | Initial & Date               |
|                                  | <input checked="" type="checkbox"/> | Protection of exposed foundation insulation           | (IA1), (IIA1)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Insulation placement and R-values                     | (IA2), (IIA2)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Fenestration and door U-factor and product ratings    | (IA3), (IIA3)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Fenestration air leakage                              | (IA4), (IIA4)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Fenestration areas                                    | (IA5), (IIA5)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Air barrier - visual inspection                       | (IA6), (IIA6)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Air barrier - testing                                 | (IA7), (IIA7)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Air barrier continuity plan testing/inspection        | (IIA8)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Vestibules                                            | (IIA9)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Fireplaces                                            | (IB1), (IIB1)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Ventilation and air distribution system               | (IB2)                                 |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Shutoff dampers                                       | (IIB2)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | HVAC-R and service water heating equipment            | (IB3), (IIB3)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | HVAC-R and service water heating system controls      | (IB4), (IIB4)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | HVAC-R and service water piping design and insulation | (IB5), (IIB5)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Duct leakage testing, insulation and design           | (IB6), (IIB6)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Metering                                              | (IC1), (IIC1)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Lighting in dwelling units                            | (IIC2)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Interior lighting power                               | (IC2), (IIC3)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Exterior lighting power                               | (IIC4)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Lighting controls                                     | (IIC5)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Electrical motors and elevators                       | (IIC6)                                |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Maintenance information                               | (ID1), (IID1)                         |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Permanent certificate                                 | (ID2)                                 |                                              |                              |
|                                  | <input checked="" type="checkbox"/> | Electric vehicle service equipment requirements       | (ID3)                                 |                                              |                              |

\* For column 3C, indicate date when the actual final inspection was performed.

**4 Design Applicant's Statements and Signatures** (P.E./R.A. responsible for plans must sign and seal)

I have identified herein all of the progress inspections, and commissioning required for compliance and determined whether commissioning is required.

Commissioning is required for applications where C408 or ASHRAE 90.1 Section 6.7.2.3 requires commissioning. Check one:

- ☐ This project requires commissioning and a preliminary commissioning report certification will be provided prior to sign-off.
- ☐ This project does not require commissioning.

Name (please print)

Signature

Date

P.E./R.A. Seal (apply seal, then sign and date over seal)

**5 Inspection Applicant's Identification of Responsibilities**

*Check all that apply below:*

- ☐ For the **Progress Inspections** indicated above in Section 3 and identified by me for responsibility, I certify that I am the principal/director of the progress inspection agency accepting responsibility for conducting the inspections as identified in section 3B. I further certify that I have read the applicable sections of the New York City Construction Codes and 1 RCNY 5000-01 in connection with progress inspections as well as 1 RCNY 101-07, which specifies the qualifications required for each progress inspector, and that this agency meets those qualifications for each and every progress inspection for which I/we take responsibility. I agree that both I and the agency will comply with all provisions of the New York City Construction Codes and the Rules. I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.
- ☐ **Change of Applicant:** I am a newly designated individual responsible for the items specified herein and I hereby state that:
- ☐ None of the inspections/tests indicated herein have been performed to date by the previously designated individual.
- ☐ Some of the inspections/tests indicated herein have been performed by the previously designated individual, as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

Name (please print)

Signature

Date

P.E. / R.A. Seal (apply seal, then sign and date over seal)

**6 Inspection Applicant's Certification of Completion**

☒ I have completed the items specified herein and certify the following (check one only):

- ☒ All work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Energy Conservation Code and other designated rules and regulations.
- ☐ All work performed substantially conforms to approved construction documents and has been performed in accordance with applicable provisions of the New York City Energy Conservation Code and other designated rules and regulations, except as indicated in the attached report.

I am aware of the additional sanctions imposed on false filings by §28-211.1.2 of the Administrative Code.

☐ **Withdrawal of Applicant:** I am withdrawing responsibility for the items of progress inspections and/or tests indicated herein and herewith submit the results or status of the work performed to date.

Name (please print)

Robert J. Stahl

Signature

Date

P.E. / R.A. Seal (apply seal, then sign and date over seal)