		I-06-A (Revised 01/16) E OF ACCEPTANCE		CALIFORNIA I		NRCA-MCH-06-A
Dema		rol Ventilation Systems Acceptance				(Page 1 of 2)
Project N	lame:		Enforcement	Agency:	Per	rmit Number:
Project A	Address:		City:		Zip	Code:
System Name or Identification/Tag:		System Location or Area Served:				
Note:	Submit	one Certificate of Acceptance for each system	that	Enforcement Agency Use: Checked by/Date		
		strate compliance.		, , , , , , , , , , , , , , , , , , ,		
In	tent:	Verify that systems required to employ demo based on maintaining interior carbon dioxide		lled ventilation (refer to §121(c)3) can vary out centration setpoints	side ven	tilation flow rates
A. Cor	structio	on Inspection				
1	nstrume	entation to perform test may include, but not l	imited to:			
	a. Ca	librated hand-held CO ² analyzer				
	b. Ma	anufacturer's calibration kit				
	c. Ca	librated CO ² /air mixtures				
2	nstallati	on				
		e sensor is located in the high density space beads.	etween 3ft	and 6 ft above the floor or at the anticipated	evel of t	he occupants'
3	Documentation of all carbon dioxide control sensors includes (check one of the following):					
ľ			icludes (ch	eck one of the following):		
		libration method	ıcludes (ch	eck one of the following):		
	a. Ca					
	a. Ca	libration method				
	a. Ca	libration method Factory-calibration (certificate calibration of Field calibrated processor accuracy	cert must b	pe attached)		
	a. Ca	libration method ☐ Factory-calibration (certificate calibration of ☐ Field calibrated nsor accuracy ☐ Certified by manufacturer to be no more the	cert must b	pe attached)		
	a. Ca	libration method Factory-calibration (certificate calibration of Field calibrated insor accuracy Certified by manufacturer to be no more the attached	cert must b	pe attached)	Ţ	
B. Fu	a. Ca	libration method Factory-calibration (certificate calibration of Field calibrated in accuracy Certified by manufacturer to be no more the attached in attached in a stacked i	cert must b	pe attached)		Results
B. Fu	a. Ca	libration method Factory-calibration (certificate calibration of Field calibrated Insort accuracy Certified by manufacturer to be no more that attached nal Testing economizer controls	cert must b	ppm calibration cert must be		
B. Fu a. b.	a. Ca	libration method Factory-calibration (certificate calibration of Field calibrated insor accuracy Certified by manufacturer to be no more that attached mal Testing economizer controls eair CO ² concentration (measured dynamically	nan +/- 75	ppm calibration cert must be sensor)		Results ppm
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PASS: All Construction Inspection responses are complete and all Testing Results responses are "Pass"

STATE OF CALIFORNIA

DEMAND CONTROL VENTILATION SYSTEMS ACCEPTANC
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IFORNIA ENERGY COMMISSION	THE PERSON NAMED IN

CEC-NRCA-MCH-06-A (Revised 01/16)		CALIFORNIA ENER	GY COMMISSION
CERTIFICATE OF ACCEPTANCE			NRCA-MCH-06-A
Demand Control Ventilation Systems Acceptance		(Page 2 of 2)	
Project Name:	Enforcement Agency:		Permit Number:
Project Address:	City:		Zip Code:
System Name or Identification/Tag:	System Location or Area Served:		

System Name or Identification/Tag: Sy	tem Location or Area Served:				
DOCUMENTATION AUTHOR'S DECLARATION STATEMENT					
1. I certify that this Certificate of Acceptance documentation is accurate and complete.					
Documentation Author Name:	Documentation Author Signature:				
Documentation Author Company Name:	Date Signed:				
Address:	ATT Certification Identification (If applicable):				
City/State/Zip:	Phone:				
FIELD TECHNICIAN'S DECLARATION STATEMENT					
I certify the following under penalty of perjury, under the laws of the State of California:					
1. The information provided on this Certificate of Acceptance is true and correct.					
2. I am the person who performed the acceptance verification	I am the person who performed the acceptance verification reported on this Certificate of Acceptance (Field Technician).				
. The construction or installation identified on this Certificate of Acceptance complies with the applicable acceptance requirements					
indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance					
requirements and procedures specified in Reference Nonresidential Appendix NA7.					
I. I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has					
been completed and signed by the responsible builder/installer and has been posted or made available with the building permit(s)					
issued for the building.					
Field Technician Name:	Field Technician Signature:				
Field Technician Company Name:	Position with Company (Title):				

RESPONSIBLE PERSON'S DECLARATION STATEMENT

Address:

City/State/Zip:

I certify the following under penalty of perjury, under the laws of the State of California:

- 1. I am the Field Technician, or the Field Technician is acting on my behalf as my employee or my agent and I have reviewed the information provided on this Certificate of Acceptance.
- I am eligible under Division 3 of the Business and Professions Code in the applicable classification to accept responsibility for the system design, construction or installation of features, materials, components, or manufactured devices for the scope of work identified on this Certificate of Acceptance and attest to the declarations in this statement (responsible acceptance person).

Phone:

ATT Certification Identification (if applicable):

Date Signed:

- 3. The information provided on this Certificate of Acceptance substantiates that the construction or installation identified on this Certificate of Acceptance complies with the acceptance requirements indicated in the plans and specifications approved by the enforcement agency, and conforms to the applicable acceptance requirements and procedures specified in Reference Nonresidential Appendix NA7.
- I have confirmed that the Certificate(s) of Installation for the construction or installation identified on this Certificate of Acceptance has been completed and is posted or made available with the building permit(s) issued for the building.
- I will ensure that a completed, signed copy of this Certificate of Acceptance shall be posted, or made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a signed copy of this Certificate of Acceptance is required to be included with the documentation the builder provides to the building owner at occupancy.

Responsible Acceptance Person Name:	Responsible Acceptance Person Signature:			
Responsible Acceptance Person Company Name:	Position with Company (Title):			
Address:	CSLB License:			
City/State/Zip:	Phone:	Date Signed:		