| CERTIFICA       | ATE OF ACCEPTANCE                                                                                                     |                                            | NRCA-MCH-07-A                                                                          |
|-----------------|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------|
| Supply Fa       | n Variable Flow Controls Acceptance                                                                                   |                                            | (Page 1 of 3                                                                           |
| Project Name:   |                                                                                                                       | Enforcement Agency:                        | Permit Number:                                                                         |
| Project Address | ;:                                                                                                                    | City:                                      | Zip Code:                                                                              |
| ystem Name o    | or Identification/Tag:                                                                                                | System Location or Area Served:            | l .                                                                                    |
|                 | mit one Certificate of Acceptance for each syste<br>ate compliance.                                                   | m that must   Enforcement Agency Use       | e: Checked by/Date                                                                     |
| Intent:         | Verify that the supply fan speed in a varia                                                                           | ble air volume system modulates to mee     | et system airflow demand.                                                              |
| A. Constr       | uction Inspection                                                                                                     |                                            |                                                                                        |
| Vote: MCF       | H-07 can be performed in conjunction with MCH                                                                         | I-02 Outdoor Air Acceptance since testin   | g activities overlap.                                                                  |
| 1. Support      | ing documentation needed to perform test incl                                                                         | ludes:                                     |                                                                                        |
| a.              | As-built and/or Design Documents including N                                                                          | Mechanical Equipment Schedules.            |                                                                                        |
| b.              | 2013 Building Energy Efficiency Standards Nonresidential Compliance Manual (NA7 5 6 Supply Ean Variable Flow Controls |                                            |                                                                                        |
| c.              | 2013 Building Energy Efficiency Standards.                                                                            |                                            |                                                                                        |
| 2. Instrum      | entation to perform test includes:                                                                                    |                                            |                                                                                        |
| a.              | Calibrated differential pressure gauge.                                                                               |                                            |                                                                                        |
|                 | Date of calibration:                                                                                                  | (must be within one year)                  |                                                                                        |
| b.              | Static Pressure Probe                                                                                                 |                                            |                                                                                        |
| c.              | Drill                                                                                                                 |                                            |                                                                                        |
| d.              | Rubber Plugs                                                                                                          |                                            |                                                                                        |
| 3. Installat    | ion:                                                                                                                  |                                            |                                                                                        |
| a.              | The static pressure location, setpoint, and ressection 140.4(c)2B and 140.4(c)C: (check all the                       |                                            | 013 Building Energy Efficiency Standards                                               |
|                 | If sensor is located downstream of major controlled to satisfy the sensor furthest b                                  | • • •                                      | d in each major branch with fan capacity                                               |
|                 | Set point is no greater than one-third of t                                                                           | the total design fan static pressure.      |                                                                                        |
|                 | Design TSP:in. w.c.                                                                                                   | Setpoint:in.w.c                            | :.                                                                                     |
|                 | If system has DDC to the zone level it has 140.4(c) 2C. Reset is based on the zone r nearly wide open.                |                                            | ding Energy Efficiency Standards Section point is reset lower until one zone damper is |
| b.              | Supply fan includes a device for modulati                                                                             | ng airflow, such as variable speed drive   | or electrically commutated motor.                                                      |
| 4. Field        | d calibrate all discharge static pressure sensors:                                                                    |                                            |                                                                                        |
|                 | Performed field-calibration using calibrated d                                                                        | lifferential pressure gauge and static pre | essure probe.                                                                          |
|                 | Calibration complete, all pressure sensor                                                                             | s ± 10% of calibrated reference sensor (   | provide supporting documentation).                                                     |
| Notes:          |                                                                                                                       |                                            |                                                                                        |

# STATE OF CALIFORNIA SUPPLY FAN VARIABLE FLOW CONTROLS ACCEPTANCE

| CEC-NRCA-MCH-07-A (Revised 01/16)            | CALIFORNIA ENE                  | RGY COMMISSION |
|----------------------------------------------|---------------------------------|----------------|
| CERTIFICATE OF ACCEPTANCE                    |                                 | NRCA-MCH-07-A  |
| Supply Fan Variable Flow Controls Acceptance |                                 | (Page 2 of 3)  |
| Project Name:                                | Enforcement Agency:             | Permit Number: |
| Project Address:                             | City:                           | Zip Code:      |
| System Name or Identification/Tag:           | System Location or Area Served: | 1              |

| B. Functional Testing                               |                                                                                                                                                                                                                                                                                                                                                                                                                                   |      | Results |      | is . |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|------|------|
| Step 1: Drive all VAV boxes to full design airflow. |                                                                                                                                                                                                                                                                                                                                                                                                                                   |      |         |      |      |
| a.                                                  | Refer to design documents and record system design airflow.                                                                                                                                                                                                                                                                                                                                                                       |      |         |      | cfm  |
| b.                                                  | Supply fan speed modulates to increase capacity.                                                                                                                                                                                                                                                                                                                                                                                  |      | Yes     | N    | 0    |
| C.                                                  | Record fan frequency:                                                                                                                                                                                                                                                                                                                                                                                                             |      |         |      | Hz   |
| d.                                                  | Supply fan maintains discharge static pressure $\pm$ 10% of the current operating set point. If NA, individues section.                                                                                                                                                                                                                                                                                                           |      | Yes     | No   | NA   |
|                                                     | Note: If NOT performing this test in conjunction with MECH-2A, other methods for verifying Variable operation include increasing static pressure setpoint or putting all the VAV boxes into full cooling. Was one of these methods used?  Due to diversity in system design, static pressure setpoint will likely not be achieved when all VAV be cooling. If this occurs, verify fan speed is 60 Hz and indicate NA in step 1.d. |      | Yes     | N    | 0    |
| e.                                                  | Verify that supply fan controls stabilize within a 5 minute period.                                                                                                                                                                                                                                                                                                                                                               |      | Yes     | N    | lo   |
| Note                                                | S:                                                                                                                                                                                                                                                                                                                                                                                                                                |      |         |      |      |
| Step                                                | 2: Drive all VAV boxes to reduced or minimum airflow.                                                                                                                                                                                                                                                                                                                                                                             |      |         |      |      |
| a.                                                  | Supply fan speed modulates to decrease capacity.                                                                                                                                                                                                                                                                                                                                                                                  |      | Yes     | N    | lo   |
| b.                                                  | Record fan frequency:                                                                                                                                                                                                                                                                                                                                                                                                             |      |         |      | Hz   |
| C.                                                  | Current operating static pressure setpoint has decreased (for systems with DDC to the zone level).                                                                                                                                                                                                                                                                                                                                |      | Yes     | No   | NA   |
| d.                                                  | Supply fan maintains discharge static pressure ± 10% of the current operating setpoint.                                                                                                                                                                                                                                                                                                                                           |      | Yes     | 1    | No   |
| e.                                                  | Supply fan controls stabilize within a 5 minute period.                                                                                                                                                                                                                                                                                                                                                                           |      | Yes     | I    | No   |
| Note                                                | S:                                                                                                                                                                                                                                                                                                                                                                                                                                |      |         |      |      |
| Sharr                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                   | Voc  | NI      |      |      |
| Step                                                | 3: System returned to initial operating conditions                                                                                                                                                                                                                                                                                                                                                                                | Yes  | No      |      |      |
| C. T                                                | esting Results                                                                                                                                                                                                                                                                                                                                                                                                                    | PASS |         | FAIL |      |

| C. Testing Results                                                                       | PASS | FAIL |
|------------------------------------------------------------------------------------------|------|------|
| Step 1: Drive all VAV boxes to achieve full design airflow (Pass if all answers are Yes) |      |      |
| Step 2: Drive all VAV boxes to minimum flow (Pass if all answers are Yes)                |      |      |

| D. Evaluation                                                                                                         |   |
|-----------------------------------------------------------------------------------------------------------------------|---|
| □ PASS: All <b>Construction Inspection</b> responses are complete and all <b>Testing Results</b> responses are "Pass" |   |
| Notes:                                                                                                                |   |
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STATE OF CALIFORNIA

System Name or Identification/Tag:

Project Address:

# SUPPLY FAN VARIABLE FLOW CONTROLS ACCEPTANCE

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|----------------------------------------------|---------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| EC-NRCA-MCH-07-A (Revised 01/16)             | CALIFORNIA EN       | IERGY COMMISSION | The state of the s |
| CERTIFICATE OF ACCEPTANCE                    |                     | NRCA-MCI         | H-07-A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Supply Fan Variable Flow Controls Acceptance |                     | (Page            | 3 of 3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Project Name:                                | Enforcement Agency: | Permit Number:   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                              |                     |                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |

City:

System Location or Area Served

| DOCUMENTATION AUTHOR'S DECLARATION STATEMENT                                          |                                                   |  |  |
|---------------------------------------------------------------------------------------|---------------------------------------------------|--|--|
| 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 reported on this Certificate of Acceptance (Field Technician).
- 3. 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.
- 4. 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):                    |              |  |
|                                |                                                   |              |  |
| Address:                       | ATT Certification Identification (if applicable): |              |  |
|                                |                                                   |              |  |
| City/State/Zip:                | Phone:                                            | Date Signed: |  |
|                                |                                                   |              |  |
|                                |                                                   |              |  |

## **RESPONSIBLE PERSON'S DECLARATION STATEMENT**

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.
- 2. 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).
- 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.
- 4. 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.
- 5. 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: |  |

Zip Code: