



**TOWN OF BLUFFTON
BUILDING PERMIT APPLICATION
DUCT SEALING CERTIFICATE**

Growth Management Customer Service Center
20 Bridge Street
Bluffton, SC 29910
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applicationfeedback@townofbluffton.com

Duct Sealing Certificate Due before Final Inspection					
Permit Number:					
Contractor Name:			Owner Name:		
Address:			Address:		
Phone:			Phone:		
Location of Work:					
The duct tightness was tested by the above referenced contractor.					
CFM25 per 100 ft² of Conditioned Floor Area = CFM25 x 100/Conditioned Floor Area Served					
If all ducts are not located within conditioned space, builder must verify that either the post construction duct leakage to outdoors (PCO) is ≤ 8 cfm/100 ft ² , the post construction total duct leakage (PCT) is ≤ 12 cfm/100 ft ² . The Rough-In total leakage shall be ≤ 6 cfm/100 ft ² of conditioned floor area, if air handler is not installed at the time of test the total leakage shall be ≤ 4 cfm/100 ft ² of conditioned floor area. State which method was used to conduct the duct tightness test: duct blower (DB), modified blower door subtraction method (MBDS), or automated multipoint blower door (AMBD).					
Table					
System	Method (DB, MBDS, AMBD)	Test (PCO, PCT, RIT)	CFM25	Area Served (ft ²)	Test Result
1					
2					
3					
Certification					
The Contractor hereby certifies the above referenced duct tightness test was done in accordance with the specification established by the 2009 International Energy Conservation Code Section 403.					
_____		_____		_____	
Print name		Signature of Mechanical Contr/authorized agent		Date	