

CERTIFICATE OF ACCEPTANCE		NRCA-CDR-01-E
Building Commissioning		(Page x of 2)
Project Name/Address:		
General Information		
Climate Zone:	Building Type:	Conditioned Area (sf):
Enforcement Agency:		Permit Number:
Enforcement Agency Use: Checked by		Enforcement Agency Use: Date

COMPLETION OF INDIVIDUAL COMMISSIONING REQUIREMENTS:

120.8(b) - OWNER'S PROJECT REQUIREMENTS: OPR has been completed and approved by owner?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____

120.8(c) - BASIS OF DESIGN: BOD has been completed and meets the requirements of the OPR?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____
Architect, Engineer or Designer of Record (Print Name):	Signature: _____ Date: _____

120.8(e) - COMMISSIONING MEASURES SHOWN IN CONSTRUCTION DOCUMENTS: Owner-approved commissioning specifications are included in the construction documents?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____
Architect, Engineer or Designer of Record (Print Name):	Signature: _____ Date: _____

120.8(f) - COMMISSIONING PLAN: The Commissioning Plan has been completed?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____

120.8(g) - FUNCTIONAL PERFORMANCE TESTING: Functional Performance Tests have been completed and any deficiencies corrected?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____
Cx Coordinator (Print Name):	Signature: _____ Date: _____

120.8(h)1 - SYSTEMS MANUAL: Systems Manual has been completed?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Owner/Owner's Representative (Print Name):	Signature: _____ Date: _____

120.8(h)2 - TRAINING: Training program and delivery of training has been completed (maintenance staff available to receive training) OR written training program has been provided (maintenance staff unavailable to receive training)?	YES <input type="checkbox"/> NO <input type="checkbox"/>
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120.8(i) - COMMISSIONING REPORT: Commissioning Report has been completed?	YES <input type="checkbox"/> NO <input type="checkbox"/>
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Owner/Owner's Representative (Print Name):	Signature:	Date:
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