



CITY OF ALBUQUERQUE

ENERGY PLAN REVIEW CHECKLIST

2009 New Mexico Energy Conservation Code

As Adopted by the Albuquerque Uniform Administrative Code

Residential

Commercial

Building ID: _____ Building Conditioned Floor Area: _____ sq.ft. Date: _____

Building Contact Name: _____ Phone: _____ E-mail: _____

Building Address: _____ Climate Zone: 4 B

Compliance Method (check all that apply): Prescriptive Path Trade-Off Performance Path

NOTE: (Trade-Off or Performance Path approach must attach documentation)

Compliance software Used: _____

Project Type: New Building Existing Building Addition Existing Building Renovation

Construction drawings and documentation available. Documentation sufficiently demonstrates energy code compliance per the currently adopted International Energy Conservation Code (IECC).

HVAC loads calculations shall comply with the currently adopted IECC:

Provide the following: • Heating system size(s): Btu: _____ K (Calculations must be provided if requested)
• Cooling system size(s): Btu: _____ K

A permit, license, or certificate inadvertently issued in conflict with the provisions of the Zoning Code or other City ordinances, rules or regulations is null and void. See, e.g., § 14-16-4-5, ROA 1994, § 6-5-3-6, ROA 1994, § 14-5-1-15, ROA 1994, § 14-6-5 (B), ROA 1004, and others. Also, a permit, license, or certificate issued based upon false or materially incorrect statement or omission in the application is null and void.

Design Professional / Owner Affidavit (If Applicable) (Must be completed before submission for permit)

As applicable to work performed under the associated application, I _____ certify that the above structure is designed in accordance with the minimum Energy Conservation requirements of the New Mexico Energy Conservation Code for Building(s). Note the issuance of a permit shall not be construed to be approval of any violation of adopted code.

Company Name: _____ Address: _____

City: _____ Zip: _____

Phone: _____ E-mail: _____

Signature (Original): _____ Printed Name: _____

STATE OF _____

COUNTY OF _____

Subscribed and Sworn to before me on this _____ day of _____, 20 _____.

Notary Public

My commission expires: _____