



Instructions

To receive the ENERGY STAR label and home certificate, send the **Modular Home Completion Report,** a copy of the completed and signed **Inspection Checklist** and the processing fee to:

Systems Building Research Alliance 1776 Broadway, Suite 2205 New York, NY 10019

Include a check for the applicable processing fee (includes FedEx Ground delivery):

\$50 production home (builder's processing fee for certificate and site label)

OR

\$150 plant certification home (\$100 for plant QA label plus \$50 builder's fee)

Please allow 5 to 7 days for delivery. For FedEx 2-Day delivery, enclose additional **\$20** S&H fee.

Send labels to (check one):

 Certifier / Rater Primary Contact Certifier / Rater Field Tester 	Modular PlantModular Builder
Other:	
Company	Contact Name
Address	
City	State Zip
Email	Phone

Questions?

Contact Gwynne Koch, SBRA ENERGY STAR Program Manager, at gkoch@research-alliance.org or 212-496-0900 x12.

ENERGY STAR[®] Qualified Modular Homes Modular Home Completion Report



1. CONTACT INFORMATION

a) Certifier / Rater Primary Contact

b) Field Tester (if different from primary contact)

Company	Contact Name	Company	Company Contact Name	
Address		Address		
City	State Zip	City	State Zip	
Phone	Fax	Phone	Fax	
Email		Email		
c) Plant		d) Builder		
Corporate Parent		Company Contact Name		
Plant Name	Contact Name	Address		
Plant City	State Zip	City	State Zip	
Phone	Fax	Phone	Fax	
Email		Email		
e) Homeowner		f) Home Location		
Name		Address		
Phone		City	State Zip	
	6 (fill in and check box) (must be ≤ 7.0		ERS Index: ≤ 5.0 in CZ 5-7 ≤ 4.0 in CZ 8)	
B. DUCT TIGHTNESS (onditioned sq. ft.:	
a) Duct leakage to out	side at 25 pascals. Measured:	cfm /	100 sq. ft s / 100 sq. ft. for Performance Path)	
	ndling equipment are in condition 0.25 cfm 50 per sq. ft. of buildin		akage tests	
a) An SBRA quality as	NCE (QA) LABEL (must chec ssurance (QA) ENERGY STAR N y a factory representative	Nodular Home Label is affi	ked to the home interior and	
•	f the factory's initial three certifica CGY STAR home site label (see i	•	label will be signed and affixed	
5. CERTIFIER/RATER	EVALUATION (check ONE)			
a) PASSES: No discre	epancies were identified			
b) FAILS: Discrepanci	es are described on the following	g sheet		
Signature of Certifier / Rate	er:	D	ate:	

EPA Form 5900-189

The government estimates the average time needed to fill out this form is 0.50 hours and welcomes suggestions for reducing this effort. Send comments (referencing OMB Control Number) to the Director, Collection Strategies Division, U.S. EPA (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460.

PROBLEMS / DISCREPANCIES AND REMEDIATION ACTIONS Home ID:			
Item No.	Discrepancy		
	Remediation		
Item No.	Discrepancy		
	Remediation		
Item No.	Discrepancy		
	Remediation		
Item No.	Discrepancy		
	Remediation		
Item No.	Discrepancy		
	Remediation		