

Company:

PO Box 39848 / Fort Lauderdale, FL 33339 / *ph 253.858.7472* / <u>www.sips.org</u> / *info@sips.org*

SIPA Master Builder Checklist for SIP Construction

Applicant name:										
Address:										
City:				State:	Zip:					
Email:					Phone:					
Quality	Overlite to stall at least one of Characterist to evolute at Deve et al (CIDe)									
Quality Installation of Structural Insulated Panels (SIPs)										
Homes constructed with structural insulated panels (SIPs) for exterior walls and/or roof construction should be inspected for quality installation to ensure proper air sealing. This inspection form needs to be signed and										
				•	——————————————————————————————————————					
submit	tted	alon	g with the results of a blower door te	st conducted by a RESN	ET certified energy rater.					
/2:2 :										
✓SIP J										
Expanding foam or manufacturer-approved sealing mastic shall be applied to each SIP joint. The sealant shall										
			ntinuously on each of the interlocking		•					
barrier	r be	twee	n the two surfaces. This has been insp	pected on the following	SIP joints:					
			Joints between two SIPs							
Yes N	No	NA	Joints between two on s							
			Joints between a SIP and a bottom p	plate						
	No	NA	<u> </u>							
	□ No	□ NA	Joints between a SIP and a top plate							
	 	□ NA	Joints between a SIP and an end-plate							
	No	NA	Any other joints as specified by the manufacturer's instructions							
When	rem	novin	g foam to fit dimensional lumber for t	he top plate, bottom pl	ate, end-plate or other locations, the					
			e flush against the lumber. Expanding							
			inconsistencies created while removir		• •					
			n or sealing mastic shall be in addition	•						
	_		seal the plates to SIPs. This has been i							
			sear the plates to SIFS. This has been	inspected on the follow	ing sir joints.					
_ -	□ No	□ NA	Joints between a SIP and a bottom p	late						
_ -	□ No	□ NA	Joints between a SIP and a top plate							
			Jainta hatuusan a CID and an and all the							
Yes N	No	NA	Joints between a SIP and an end-plate							
			Any other joints as specified by the manufacturer's instructions							
Yes N	No	NA								



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√SII	✓ SIP PENETRATIONS							
Any	Any through-wall penetrations of SIPs shall be sealed with expanding foam or sealing mastic, such that the full							
thick	thickness of the SIP void is filled. Scrap insulation has not been used to fill in the void. This has been inspected							
on t	on the following SIP penetrations:							
□ Yes	□ No	□ NA	Penetrations for HVAC duct work					
□ Yes	□ No	□ NA	Penetrations for electrical wiring					
□ Yes	□ No	□ NA	Penetrations for plumbing					
□ Yes	□ No	□ NA	All gaps around windows and exterior doors					
□ Yes	□ No	□ NA	Any other through-wall penetrations					
			nterface Connections					
	ALL seams shall be sealed on the "warm side in winter" with either expanding foam, manufacturer approved							
	_		and/or SIP tape to meet building code requirements. This is in addition to any sealing required by					
			rer in the interior of the SIP joints. Sealant is continuous and flush against both					
inte	rlocki	ng/to	uching surfaces. This has been inspected on the following SIP connections:					
□ Yes	□ No	□ NA	SIPs aligned horizontally and at corners					
□ Yes	□ No	□ NA	SIPs stacked vertically (between top and bottom plate of two or more story building)					
□ Yes	□ No	□ NA	SIPs and the concrete foundation					
			SIPs and windows/skylights					
Yes	No	NA	on o and whiteowoj skynghts					
□ Yes	□ No	□ NA	SIPs and rim-joist panels					
□ Yes	□ No	□ NA	SIPs intersecting at the roof-peak (sealed externally AND internally)					
□ Yes	□ No	□ NA	SIPs and the eaves					
□ Yes	□ No	□ NA	Any other applicable connections					
	_							



Signature:

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Building Envelope Leakage Testing										
To meet the criteria of SIPA's Master Builder Program, the home must undergo a blower door test conducted										
by a RESNET certified energy rater. Please input the blower door test results and rater information below IN										
ADD	ADDITION to enclosing the summary page of the test results.									
1.	□ Yes	□ No	Blower door diagnostic testing was performed by a RESNET certified energy rater							
2.			Enter the whole house air infiltration (ACH50)							
Energy Rater Contact Information										
Company:										
Name:										
Address:										
City:				State:	Zip:					
Ema	il:				Phone:					
DECLARATION STATEMENT I certify that all the information provided on this form is true and correct.										
 I certify that the installed features, materials, components, or manufactured devices identified on this checklist conform to all applicable codes and regulations, and the installation is consistent with the plans and specifications approved by the enforcement agency. 										
Print name:										

Date: