



City of YUMA

# DUCT LEAKAGE TEST FILL FORM - 2012 IRC (Amended)

TESTING CONTRACTOR: \_\_\_\_\_ MECH CONTRACTOR: \_\_\_\_\_

Permit Number \_\_\_\_\_ Address: \_\_\_\_\_ Lot: \_\_\_\_\_

Floor Plan/Model \_\_\_\_\_ Sq Ft of Conditioned Space: \_\_\_\_\_

Select one:  Post Construction Test  
Max leakage 8 cfm/100SF  Rough-in Test w/AC installed  
Max leakage 6 cfm/100sf  Rough-in Test w/No AC  
Max leakage 4 cfm/100sf

Area Served: \_\_\_\_\_

Building Inspector Present: YES \_\_\_\_\_ NO \_\_\_\_\_

## Duct Blaster Test

Ring#	Total Pressure Min: (25 pa)	Total Leakage Test (CFM):	Allowable Leakage (CFM)
_____	_____	_____	_____

Tech Name \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*Please submit Duct Leakage Test Forms in person at City Hall, 2nd Floor, Community Development or one of the following methods:*

**Mail:** City of Yuma - DCD-Building Safety Division  
One City Plaza  
Yuma, Arizona 85364

**Email:** [Donna.Rico@yumaaz.gov](mailto:Donna.Rico@yumaaz.gov)  
**Email:** [Sandra.Vasquez@yumaaz.gov](mailto:Sandra.Vasquez@yumaaz.gov)  
**Fax:** 928-373-5164