



INSULATION INFORMATION AND COMPLIANCE FORM

Part A: Building Plan Submittal Information DATE _____

PROJECT PERMIT NUMBER PR – 20____ - _____

PARCEL NUMBER _____ SUBDIVISION NAME _____

The following is the proposed insulation for the above residence. The insulation will be applied to the walls and ceilings per the manufacturer's specifications.

NOTE: Wherever blown-in or sprayed insulation is applied to walls the installer shall supply certification of the installed density and R-value. Where blown-in or sprayed insulation is applied to roof ceiling assemblies the installer shall provide certification of the initial installed thickness, settled thickness, coverage area, and number of bags of insulation material installed. Markers shall be provided for every 300 square feet of attic area, attached to the trusses, rafters, or joists, and indicate in 1 inch-high numbers the installed thickness of the insulation. (Section R303 of the 2018 IECC)

All insulation, vapor barrier, and ventilation information must be listed at the proper location on the building plans.

GENERAL CONTRACTOR _____

Address: _____ Phone: _____

INSULATION CONTRACTOR _____

Address: _____ Phone: _____

Complete the table for insulation information on the following sheet as a requirement for Part A.

A copy of the table will be attached to the Permit Copy of the Building Plans.

It will be required that the information contained in the table be certified after the products have been installed. The signed and dated certificate will be submitted to the Kane County Building Division (No Fax Copies) before the Final Inspection is scheduled.

For Office Use Only

Received by: _____ Date: _____



PERMIT NUMBER PR - 20_____ - _____

Part B: TABLE OF COMPONENTS (FOR PLAN SUBMITTAL) FILL IN ALL SPACES IN FOLLOWING TABLE - REQUIRED

LIST THE METHOD YOU ARE USING TO SHOW COMPLIANCE WITH THE RESIDENTIAL ENERGY EFFICIENCY CHAPTER 4 [RE] OF THE 2018 IECC AS AMENDED BY THE STATE OF ILLINOIS.

Method 1. SECTION 401, 402, 403, AND 404 (PRESCRIPTIVE) _____

Method 2. SECTION 401 AND 405 (PERFORMANCE) _____

Mandatory Sections of the 2018 IECC: R401.3, 402.4, 402.5, 403.1, 403.1.2, 403.3.2, 403.3.3, 403.3.5, 403.4, 403.6, 403.7, 403.8, 403.10, 403.11, 403.9, 403.10, 403.11, 404.1, 406.3

Location	Material (fiberglass - foam - cellulose)	ICC Evaluation (other than fiberglass)	Manufacturer	R Value	Thickness	Vapor Barrier Type ** and Perm Rating	Thermal or Ignition Barrier (+ = REQUIRED)
Basement Walls R20 (EXT. WOOD FRAMED)							+
Foundation Walls (POURED CONCRETE) CONTINUOUS R10 / CAVITY R13							+
Crawl Walls R15/19							+
Rim Joists 1 ST Floor R20							+
Rim Joists 2 nd Floor R20							
Floor R30							
Perimeter Insulation R10 Heated Slab Insulation R15							
Framed Walls R20							+
Insulated Sheathing min. R2							
Flat Ceilings R49							+
Cathedral Ceilings R30* (500 sq ft max.)							+
Conditioned Attic R49/38							+

* 1 inch airspace is required above the insulation.

** Provide all data that a vapor barrier is not required with this product based on testing & code requirements.

REV. 10/2019

NOTE: THE MAXIMUM FENESTRATION U-FACTOR FOR THE WINDOWS IS 0.30

Note: If any changes are made to the above table information a new form must be filled out and approved by the Building Division.



All of the Following Information is to be Filled Out and Submitted to the Building Division
After the Project is Complete and Before Scheduling the **Final** Inspection.

Permit Number: PR – 20 _____ - _____

Part C: Insulation Compliance Certificate (Required After Project is Complete)

I certify that the above listed project has been insulated per the submitted table (Part B).

Insulation Installer Signature: _____ Company Name: _____

Printed Name: _____ Date: _____ Phone Number: _____

I certify that all items not installed by the insulation installer on the above listed project have been completed per the submitted table (Part B). (Vapor Barrier, Ventilation, Thermal Barriers, and Ignition Barriers)

Owner or Authorized: _____ Company Name: _____
Agent Signature

Printed Name: _____ Date: _____ Phone Number: _____

Part D: Compliance Certificate for the 2018 IECC Requirements (Required After Project is Complete)

This is to certify that all components of the IECC requirements as listed on the approved plans for this project have been installed and that this project complies with the 2018 IECC as amended by the State of Illinois.

Owner or Authorized: _____ Company Name: _____
Agent Signature

Printed Name: _____ Date: _____ Phone Number: _____

DO NOT FAX – ORIGINAL SIGNATURE/S REQUIRED

For Office Use Only

Received by: _____ Date: _____ Entered in KPASS _____