



Town of Medley
Building Department

7777 NW 72nd Avenue, Medley, FL 33166
Phone: 305.887.9541 Fax: 305.887.6928

INSULATION CERTIFICATE

| |
|------------------|
| Permit No: |
| Project Name: |
| Project Address: |

STATEMENT OF COMPLIANCE

We, the undersigned, hereby certify that the THERMAL INSULATION installed in the above referenced project is in compliance with the latest edition of the FLORIDA BUILDING CODE, the APPROVED ENERGY CALCULATIONS and Plans, and is in accordance with good construction practice. The insulation furnished and installed has the characteristics shown below: (Circle the applicable items).

- Exterior CBS Walls Insulation:** R-_____ (Min.) Material: _____
Thickness: _____ inch(es) Density: _____ lb/ft Mfr: _____
- Exterior Frame/Metal Stud Walls:** R-_____ (Min.) Material: _____
Thickness: _____ inch(es) Density: _____ lb/ft Mfr: _____
- Exterior solid concrete walls:** R-_____ (Min.) Material: _____
Thickness: _____ inch(es) Density: _____ lb/ft Mfr: _____
- Interior walls separating A/C from non A/C spaces insulation:** R-_____ (Min.) Material: _____
Thickness: _____ inch(es) Density: _____ lb/ft Mfr: _____
- Ceiling insulation:** R-_____ (Min.); Material: _____
Thickness: _____ inch(es) Density: _____ lb/ft Mfr: _____

Note: Do not use this form for lightweight Insulating concrete.

| Insulation Contractor | | General Contractor / Builder | |
|-----------------------|-----------------|------------------------------|-----------------|
| Company Name | Corporation No. | Company Name | Corporation No. |
| Qualifiers Name | License No: | Qualifiers Name | License No: |
| Signature | Date | Signature | Date |

SWORN AND SUBSCRIBED before me by _____ being personally known to me _____ OR having produced as identification _____ and who being fully sworn and cautioned, states that the foregoing is true and correct to the best of his/her knowledge and belief.

Signature of Notary: _____ Print Name: _____ Date: _____

Notary Public Stamp:

My Commission Expires: