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STAND SURE

Energy Efficiency Check List

Version 1105p

For Energy Efficiency Assessments, please provide the following information: Date _____

SITE ADDRESS _____ Postcode _____

REAL PROPERTY DESCRIPTION Lot No _____ RP/SP _____ Parish _____

Site Plan showing North (e.g. boundary bearings) (overshadowing buildings will be included in the assessment if drawings showing their size/height/location are provided)

Floor Plans and Roof Plan (e.g. outline), either PDF (preferred), hard-copy or faxed

Elevations (showing window & wall types)

Floor coverings (shown on plans OR floor covering schedule attached)

Sections (if available)

Lighting Plan & Schedule (if available)

BCA ENERGY EFFICIENCY ASSESSMENT TYPE Thermal Calculation Deemed to Satisfy (elemental)
(Residential Star Rating / Reference Building)

AIRFLOW IN HABITABLE ROOMS (select if appropriate)

Weather Seals

Insect screens (indicate on drawings)

Ceiling Fans (indicate on plans)

Solar Panels >1kW

Mechanical roof space ventilation

Outdoor Living Area Ceiling Fan

Outdoor Living Area Roof Insulation

BUILDING FABRIC (notes) _____

Window and door sizes shown on plans

OR

Glazing and door schedules attached

Glass type (generic)

Clear

Tinted

Low-E

Double glazed

OR NFRC performance values (Glass-only)

U-value _____

Solar Heat Gain Coefficient _____

OR Glass product details

Frame type (generic)

Aluminium

Thermally Improved Al.

Timber

PVC

(notes) _____

External walls Solid Concrete

Hollow Concrete

Cavity Panel (lightweight)

Brick Veneer

External wall frames Timber

Steel (R0.2 Thermal Break required)

External wall colour/solar absorptance _____

(notes) _____

Ext. wall insulation (added) Product _____ OR Foil R-value of **Fibre only** _____

Int. wall insulation (added) Product _____ OR Foil R-value of **Fibre only** _____

Floor insulation (added) Product _____ OR Foil R-value of **Fibre only** _____

Ceiling insulation (added) Product _____ OR Foil R-value of **Fibre only** _____

Roof insulation (added) Product _____ OR Foil R-value of **Fibre only** _____

(notes) _____

Roof type Metal

Tiles

Suspended Concrete

Roof colour/solar absorptance _____

Skylights Single glazed

Double glazed

Diffuser

Insulated shaft R-value _____

(notes) _____

CONTACT DETAILS I certify that this information is correct. Costs associated with recovery of outstanding debts are payable by below.

Contact (Name, Company) _____

Telephone _____

Send Report to (Name, Company) _____

Address _____ Postcode _____

Send Tax Invoice to (Name, Company) _____

Address _____ Postcode _____

Telephone _____ Purchase Order _____