

# BIG RAPIDS TOWNSHIP BUILDING DEPARTMENT

Fred Bradley, Building Official

14212 NORTHLAND DRIVE, BIG RAPIDS MI 49307

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## INSULATION INSTALLATION AFFIDAVIT

BUREAU OF CONSTRUCTION CODES – MICHIGAN UNIFORM ENERGY CODE RULES PART 10 Rule 1071. Materials and equipment, identification; insulation installation....

(2) Each piece of building envelope insulation that is 12 inches or more in width shall have a manufacture applied thermal resistance (R) identification mark or the insulation installer shall provide a signed and dated certification for the insulation installed in each element of the building envelope. The certification shall list the type of insulation, the manufacturer, and the R-value. For blown-in or sprayed insulation the installer shall also provide all of the following information:

(a) the initial installed thickness. (b) the settled thickness. (c) the coverage area. (d) the number of bags installed.

For all Types of Insulation provide the following information:

Date of Installation: \_\_\_\_\_ Address of Installation: \_\_\_\_\_

As per the Bureau of Construction Codes, Rule 107.(2), please provide a signed, dated and accurately completed installation receipt, noting all of the following information:

(1) Type or Insulation Installed:

\_\_\_\_\_(2) The Insulation Manufacturer:

\_\_\_\_\_(3) The R-Value of the Insulation Installed:

If the insulation is blown-in or sprayed, please provide the following:

(1) The initial installed thickness:

\_\_\_\_\_(2) The settled thickness:

\_\_\_\_\_(3) The square footage of coverage area:

\_\_\_\_\_(4) The number of bags installed:

**Note:** *The applicator shall cut the manufacturer=s coverage chart from a bag installed and with this affidavit, staple them to a rafter or truss directly above the attic access hole. A copy of this affidavit shall be provided to the Building Official at the final inspection before a Certificate of Occupancy is issued.*

### APPLICATORS INFORMATION:

Name:

Street Address:

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code:

\_\_\_\_\_  
Signature of Applicator

\_\_\_\_\_  
Date of Installation

\* **NOTE:** AFFIDAVIT MUST BE SIGNED AND DATED BY APPLICATOR