

To register as an Independent Third-Party Energy Technician, complete and present this form in person with valid photo identification.

TYPE OF REQUEST

Indicate the type of request: NEW RENEWAL, PROVIDE EXISTING REG. # _____

TECHNICIAN INFORMATION

Name: _____ Driver's Lic. No. _____ State: _____

Address (No P.O. Box): _____ Phone Number: (____) _____

City: _____ State: _____ Zip Code: _____ Email Address: _____

**BUSINESS OR COMPANY INFORMATION
(IF ANY INFORMATION IS DIFFERENT)**

Company's Name: _____ Phone Number: (____) _____

Business Address (No P.O. Box): _____ Fax Number: (____) _____

City: _____ State: _____ Zip Code: _____ Email Address: _____

**PROVIDER INFORMATION
(IF TECHNICIAN IS, OR WORKS UNDER SUPERVISION OF RATER OR PROVIDER)**

Name: _____ Phone Number: (____) _____

Business Address (No P.O. Box): _____ Fax Number: (____) _____

City: _____ State: _____ Zip Code: _____ Email Address: _____

Signature: _____

CERTIFICATION

**Check one as
Appropriate**

Type of Certification

Certificate Number

- | | | |
|--------------------------|-----------------------------------------------------------|-------|
| <input type="checkbox"/> | Home Energy Rating System/Certified Home Energy Rater | _____ |
| <input type="checkbox"/> | Home Energy Rating System/Certified Field Inspector | _____ |
| <input type="checkbox"/> | Building Performance Institute/Certified Building Analyst | _____ |
| <input type="checkbox"/> | ICC Certified Residential Energy Inspector/Plans Examiner | _____ |

ACKNOWLEDGEMENT

I am trained and certified to perform leakage testing for residential energy efficiency. I attest that I am not affiliated with a builder or construction company and that I perform diagnostic testing (blower door, duct blaster) as an independent third-party agent. I understand that the City of Houston will confirm my status as a rater through my provider and the International Code Council (ICC).

I acknowledge that the City requires only leakage testing for new residences. I understand there is no requirement to rate the entire structure but only to perform the duct blaster and/or blower door tests as applicable for the energy code compliance method used. Results shall be provided with volume calculations, targets, and actual performance.

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Energy Testing Technician's Registration No.: _____ Expiration Date: _____