

Modular/Manufactured Home Compliance Form

Final Construction Site Information					
Development Name:					
Street Address:			County:		
City:		NJ	ZIP:		
Construction Type:	□ Modular Home □Manufactur	ed Home			
Compliance Pathway:	Option 1: Certified Plant under SBRA (<i>Required for Manufactured Homes</i>)				
	Option 2: RESNET Pathway (Available ONLY for Modular Homes)				

Option 1: SBRA Pathway (SBRA-Certified Plant) – Pre-drywall completed by Plant QC staff					
Certified Plant Name:					
Address:					
City:		ST:		ZIP:	
QC staff inspector's First Name:		Last Name:			
Office Phone:			Cell:		
E-mail:			Fax:		

Option 2: RESNET Pathway (HERS-Certified Rater) – Pre-drywall performed by HERS-Certified Rater						
Rating Company*:						
Address:						
City:		ST:		ZIP:		
Rater Name:		Ra	ter #:			

*Name of the Rater/Rating Company performing the pre-drywall inspection at the non-certified plant.

I,______ (Printed Name) hereby certify that the information provided above is accurate and that I have verified that the pre-drywall inspections were conducted by persons with qualifications sufficient to satisfy applicable ENERGY STAR Homes requirements.

Submitting Rating Company signature:		Date:
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