



Building Inspections Department
100 W Center St
Kyle, Texas 78640
(512)262-3911

DUCT LEAKAGE AFFIDAVIT

This completed form is required for **ALL** New 1 & 2 Family Dwellings, Townhouses and **ALL** mechanical projects that include installing and or replacing duct systems for the same type of dwellings.

Permit #: _____ Date: _____
(If Known)

Site Address: _____
Street Name City Zip

TEST RESULT: **PASS**

I certify that this house has been tested for duct leakage in accordance with current IRC , IECC and has met the requirements for duct leakage.

Technician: _____ Technician Signature: _____
(Print Name)

Company Name: _____ Phone Number: (_____) _____

This form shall be on site for final inspection