

# Building Envelope Commissioning Verification Form

## Project Information

Project Name

Project Number

Location

Date

Commissioning Agent

## Verification Summary

Overall Status

Summary Comments

## Envelope System Checklist

System/Element	Verified	Comments
Air Barrier	<div><input type="text"/></div> <div></div>	<input type="text"/>
Vapor Barrier	<div><input type="text"/></div> <div></div>	<input type="text"/>
Insulation	<div><input type="text"/></div> <div></div>	<input type="text"/>
Fenestration/Windows	<div><input type="text"/></div> <div></div>	<input type="text"/>
Roof System	<div><input type="text"/></div> <div></div>	<input type="text"/>

Flashing/Sealants	<div><div></div></div>	<div></div>
Other	<div><div></div></div>	<div></div>

Deficiencies Noted

Corrective Actions Taken

Additional Notes

Verified By

Date