

Client TEKloch Homes  
 Development 0 Ph 0 Lot 0  
 Address 921 Rosefinch Pl  
 City Langford Postal Code 0  
 Target Step 3

Date Feb 2/2026  
 File # 7948 N 0  
 WO # 1058  
 Vol. 15654.8 Ft<sup>3</sup>  
 ACH = (CFM/Vol)\*60

## BLOWER DOOR TEST

By:

Wind	Zone: Main - Volume = 13038.8 ft3			Zone: Suite - Volume = 2616.0 ft3		
	Zone 1 Pa	Zone 1 cfm	Zone 2 Pa	Zone 2 Pa	Zone 2 cfm	Zone 1 Pa
Light						
Ext. Temp	-49.3	429	-12.8	-49.7	207	-6.0
48.2	-44.4	399	-11.5	-45.7	194	-5.8
Int. Temp	-40.5	376	-10.4	-40.6	178	-5.8
66.2   68.0	-35.3	339	-9.3	-35.4	162	-5.3
Initial Pa.	-30.7	312	-8.1	-29.9	145	-5.0
-0.4   -0.7	-25.5	282	-6.8	-24.3	125	-4.7
Final Pa	-20.4	241	-5.5	-20.5	111	-4.3
-1.5   0.6	-15.8	201	-4.3	-16.3	94	-3.9
Ring Size						
B, C, C						
Backdraft						

WINDOWS								DOORS & LITES									
Label	Dir	#	Op	Width	Height	OH	Hdr Ht	v	Label	Dir	#	Op	Width	Height	OH	Hdr Ht	v
W1.1-F-Foyer				Picture	1	24.00	36.00	✓	D1.1-HouseEntry				Fibreglass ...	6.67	3.00	✓	
W2.1-F-Stairs				Picture	1	36.00	30.00	✓	D1.2-Garage				Fibreglass ...	6.67	2.67	✓	
W2.2-F-Dining				Slider	1	60.00	48.00	✓	Ds1.1-SuiteEntry				Fibreglass ...	6.67	2.67	✓	
W2.3-L-Living				Picture	2	24.00	24.00	✓									
W2.4-B-Living				Patio Door	1	72.00	80.00	✓	D1.1-lite				Picture	1	24.00	21.00	✓
W2.5-B-Living				Slider	1	60.00	48.00	✓	Ds1.1-lite				Picture	1	21.00	34.00	✓
W3.1-F-Staris				Picture	1	30.00	30.00	✓									
W3.2-F-Bdrm				Slider	1	60.00	48.00	✓									
W3.3-L-Bdrm				Slider	1	48.00	36.00	✓									
W3.4-B-Master				Slider	1	60.00	48.00	✓									
Ws1.1-L-Kitchen				Slider	1	48.00	36.00	✓									
Ws1.2-R-Bath				Slider	1	36.00	24.00	✓									
Ws1.3-R-Bdrm				Slider	1	48.00	36.00	✓									

SFH with secondary suite on main floor  
 3 levels on SOG (walkout)

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## BLOWER DOOR TEST

## CHECKLIST

### Data & Photo Documentation Checklist

<p><b>House:</b> Front showing address <input checked="" type="checkbox"/></p> <p>All sides with all openings <input checked="" type="checkbox"/></p> <p><b>Crawl:</b> Total height = <input checked="" type="checkbox"/></p> <p>Wall insulation: <input checked="" type="checkbox"/></p> <p>Floor (above) insulation: <input checked="" type="checkbox"/></p> <p><b>Heating.:</b> ASHP outdoor unit <input checked="" type="checkbox"/></p> <p>+ label (Energy Star _____) <input checked="" type="checkbox"/></p> <p>ASHP indoor unit + label <input checked="" type="checkbox"/></p> <p>- type: <u>Mini split x 3</u></p> <p>- location: <u>Suite, Main living, Master</u></p> <p>EBB unit (each floor) <input checked="" type="checkbox"/></p> <p>+ label <input checked="" type="checkbox"/></p> <p>- location: <u>All floors</u></p> <p>Furnace / Boiler unit <input checked="" type="checkbox"/></p> <p>+ label (Energy Star _____) <input checked="" type="checkbox"/></p> <p>- type: _____</p> <p>- location: _____</p> <p><b>DHW:</b> Main house unit + pipes <input checked="" type="checkbox"/></p> <p>+ label (Energy Star _____) <input checked="" type="checkbox"/></p> <p>- location: <u>Garage</u></p> <p>Suite unit + pipes <input checked="" type="checkbox"/></p> <p>+ label (Energy Star _____) <input checked="" type="checkbox"/></p> <p>- location: _____</p>	<p><b>Whole-house ventilation:</b></p> <p>HRV + ducts <input checked="" type="checkbox"/></p> <p>+ label (Energy Star _____) <input checked="" type="checkbox"/></p> <p>- HRV location: _____</p> <p>- ducts type: _____</p> <p>- ducts location: _____</p> <p><b>Supplemental ventilation:</b></p> <p>Bathroom exhaust fan 1 <input checked="" type="checkbox"/></p> <p>Bathroom exhaust fan 2 <input checked="" type="checkbox"/></p> <p>Supply fan: <input checked="" type="checkbox"/></p> <p>Utility fan: <input checked="" type="checkbox"/></p> <p>Range hood vented outdoors <input checked="" type="checkbox"/></p> <p>Dryer <input checked="" type="checkbox"/></p> <p><b>Attic:</b> Space photos <input checked="" type="checkbox"/></p> <p>Insulation height = _____ <input checked="" type="checkbox"/></p> <p><b>Basement Wall:</b> Interior wide-angle <input checked="" type="checkbox"/></p> <p><b>Exposed Floor:</b> Underside <input checked="" type="checkbox"/></p> <p><b>Fireplace:</b> Unit - type + label <input checked="" type="checkbox"/></p> <p><b>Window / Door Label:</b> <input checked="" type="checkbox"/></p> <p><b>Low-flush toilets:</b> <u>4</u> <input checked="" type="checkbox"/></p> <p><b>Blower door installed:</b> Main House <input checked="" type="checkbox"/></p> <p>Suite <input checked="" type="checkbox"/></p>
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