

## District heating system pre-conditions (insulation): technical report template

There are insulation pre-conditions associated with district heating system (DHS)<sup>1</sup> measures installed under Home Heating Cost Reduction Obligation (HHCRO) social EFG.<sup>2</sup>

This report template relates to insulation pre-condition 2. Pre-condition 2 applies to premises, located in a multi-storey building, that do not include the top floor of the multi-storey building.

To meet pre-condition 2, all exterior-facing walls of the multi-storey building in which the premises are located must be insulated, except for walls which have:

- i. one or more parts of solid wall construction, or
- ii. a cavity which cannot be insulated (ie the cavity cannot be filled with cavity wall insulation).

This report must be completed for premises connected to a DHS under HHCRO Social EFG where there are <u>technical reasons</u> why the cavity cannot be filled.<sup>3</sup> The requirements for satisfying pre-condition 2 through this report are detailed in Chapter 4<sup>4</sup> of the ECO3 Guidance: Delivery ('Guidance').

The report must be completed by an appropriately qualified chartered surveyor<sup>5</sup> or structural engineer.<sup>6</sup>

Where there is a technical reason why the cavity cannot be insulated, this template, completed accurately, in full and in accordance with the Guidance, will satisfy pre-condition 2 for the premises it relates to. Suppliers may choose to use this form to evidence that walls are of solid wall construction.<sup>7</sup>

This form is not required for non-technical reasons why a cavity cannot be insulated. These reasons are set out in Chapter  $4^8$  of the Guidance and relate to access, consent, and legal issues.

Suppliers may adapt the format of this template, provided that the content is not changed. Suppliers may submit adapted versions to us before use for confirmation that they are acceptable.

Please contact us at eco@ofgem.gov.uk if you have any guestions.

<sup>1.</sup> Refer to the definition of "district heating connection" and "district heating system" in article 2 of the Electricity and Gas (Energy Company Obligation) Order 2018.

<sup>2.</sup> Refer to the 'Social housing E, F and G' section in Chapter 3 of the ECO3 Guidance: Delivery.

<sup>3.</sup> Where a cavity wall cannot be insulated with cavity wall insulation, there is no requirement to treat that wall with external wall insulation or internal wall insulation.

<sup>4.</sup> See section on 'Additional technical reason' for relevant district heating connections.

<sup>5.</sup> A chartered surveyor accredited with Royal Institution of Chartered Surveyors (RICS) membership (MRICS) or a Fellow (FRICS) who has qualified through the residential survey and valuation pathway.

<sup>6.</sup> A structural engineer accredited with Chartered membership of the Institution of Structural Engineers (MIStructE), or an Associate (AIStructE) or Fellow (FIStructE) of the institution.

<sup>7.</sup> A solid brick wall can be a solid brick wall or a solid non-brick wall. Solid non-brick walls include metal or timber frame walls, and walls of pre-fabricated concrete construction.

<sup>8.</sup> See section on 'Reasons for judging a cavity cannot be insulated' for relevant district heating connections.

Job reference number \_\_\_\_\_ February 2019 – Version 3.0

| District heating system pre-conditions (insulation): technical report | District heating | svstem | pre-conditions | (insulation) | ): technical report |
|---|------------------|--------|----------------|--------------|---------------------|
|---|------------------|--------|----------------|--------------|---------------------|

Complete this form if there are technical reasons why the cavity walls in a multi-storey building (excluding premises on the top floor) cannot be insulated

|           |                                 | ,                       | ,   | 3 ( 3 )                            | . ,                                 |                               |
|-----------|---------------------------------|-------------------------|---|------------------------------------|-------------------------------------|-------------------------------|
| A: Addre  | ess details 1. Provide details  | below of the multi-stor | ey building this report relates to.                                 |                                    |                                     |                               |
|           | Building                        | name or number          | Street address  | Town/City                          | County                              | Postcode                      |
| Multi-sto | rey building                    |                         |   |                                    |                                     |                               |
|           | etails:                         |                         |   |                                    |                                     |                               |
|           | nich individual door number     |                         |   |                                    |                                     |                               |
|           | ot include premises which i     | include the top hoor (  |   | ere is a suitable cavity wall insu | lation system available for each ex | terior-facing wall and if no  |
|           | nat is the construction type of | each wall?              | system is available, the re   |                                    | addit system available for each ex  | terior racing wall and, ii no |
| 7,5       |                                 |                         | There is no suitable cavity wall insulation system available for wa |                                    | le for walls shown due to:          |                               |
|           | Cavity wall                     |                         | system available for walls  |                                    | particular conditions of this       | other reasons                 |
| Wall      | (exterior-facing only)          | Other                   | shown   | wall                               | wall                                |                               |
| Wall 1    |                                 |                         |   |                                    |                                     |                               |
| Wall 2    |                                 |                         |   |                                    |                                     |                               |
| Wall 3    |                                 |                         |   |                                    |                                     |                               |
| Wall 4    |                                 |                         |   |                                    |                                     |                               |
| Wall 5    |                                 |                         |   |                                    |                                     |                               |
| Wall 6    |                                 |                         |   |                                    |                                     |                               |
| Wall 7    |                                 |                         |   |                                    |                                     |                               |
| Wall 8    |                                 |                         |   |                                    |                                     |                               |
| C: Detail | ed Technical Assessment         |                         |   | D: Qualifications of Ass           |                                     |                               |
| 5. P      | rovide full details below in s  | support of the finding  | s at (4) above.   | 6. Provide full deta               | ils below.                          |                               |
|           |                                 |                         |   | Assessor name                      |                                     |                               |
|           |                                 |                         |   | Profession (√)                     | Structural engineer                 | Chartered surveyor            |
|           |                                 |                         |   |                                    | AIStructE                           | MRICS                         |
|           |                                 |                         |   | Qualification (√)                  | MIStructE                           | FRICS                         |
|           |                                 |                         |   |                                    | FIStructE                           |                               |
|           |                                 |                         |   | Registration number                |                                     |                               |
|           |                                 |                         |   |                                    |                                     |                               |
|           |                                 |                         |   | Name of company                    |                                     |                               |
|           |                                 |                         |   | Address of company                 |                                     |                               |
|           |                                 |                         |   | riadi ess er company               |                                     |                               |
|           |                                 |                         |   | Email address                      |                                     |                               |
|           |                                 |                         |   | Telephone number                   |                                     |                               |
|           |                                 |                         |   | Signature                          |                                     |                               |
|           |                                 |                         |   | Date                               | /                                   | /                             |
|           |                                 |                         |   |                                    |                                     |                               |