



RESIDENTIAL EXISTING HOMES FORM

The following information is provided as part of the PowerSavers conservation program to encourage residential customers to select and install energy efficient equipment for their facilities. This program is a joint offering from participating utilities of the Minnkota Power Cooperative (MPC) and the Northern Municipal Power Agency (NMPA).

Instructions for Use:

For complete instructions, please refer to the Terms and Conditions, on page 6.

Step 1: Determine Eligibility: Equipment must be new and installed in a residence served by one of the participating municipal or cooperative utilities listed below. **Please check your utility:**

<input type="checkbox"/> Bagley Public Utilities	<input type="checkbox"/> Hawley Public Utilities	<input type="checkbox"/> Roseau Municipal Utilities
<input type="checkbox"/> Baudette Municipal Utilities	<input type="checkbox"/> North Star Electric Cooperative	<input type="checkbox"/> Stephen Municipal Utilities
<input type="checkbox"/> Beltrami Electric Cooperative	<input type="checkbox"/> PKM Electric Cooperative	<input type="checkbox"/> Thief River Falls Municipal Utilities
<input type="checkbox"/> Clearwater-Polk Electric Cooperative	<input type="checkbox"/> Red Lake Electric Cooperative	<input type="checkbox"/> Warren Municipal Utilities
<input type="checkbox"/> Fosston Municipal Utilities	<input type="checkbox"/> Red River Valley Cooperative Power Association	<input type="checkbox"/> Wild Rice Electric Cooperative
<input type="checkbox"/> Halstad Municipal Utilities	<input type="checkbox"/> Roseau Electric Cooperative	

Step 2: Install Equipment. New equipment must be installed and old equipment removed. Only new products which are exact product types listed in this form are eligible for prescriptive incentives. If the potential incentive is greater than \$5,000 contact the utility to get pre-approval.

Step 3: Complete and sign the application. Forms must be received within 60 days of installation. Incomplete applications will cause delays in payment.

Step 4: Mail completed application and a copy of the itemized invoice to your participating utility, listed on page 2 of this form.

PARTICIPATING COOPERATIVE UTILITIES

Beltrami Electric Cooperative

P.O. Box 488
Bemidji, MN 56619-0488
(218) 444-2540 or 1-800-955-6083, (218) 444-3676 (fax)

Clearwater-Polk Electric Cooperative

315 N. Main Ave.
Bagley, MN 56621
(218) 694-6241 or 1-888-694-3833, (218) 694-6245 (fax)

North Star Electric Cooperative

441 State Hwy. 172 N.W.
P.O. Box 719
Baudette, MN 56623-0719
(218) 634-2202 or 1-888-634-2202, (218) 634-2203 (fax)

PKM Electric Cooperative

406 N. Minnesota Street
Warren, MN 56762
(218) 745-4711 or 1-800-552-7366, (218) 745-4713 (fax)

Red Lake Electric Cooperative

P.O. Box 430
Red Lake Falls, MN 56750-0430
(218) 253-2168 or 1-800-245-6068, (218) 253-2630 (fax)

Red River Valley Cooperative Power Association

P.O. Box 358
Halstad, MN 56548-0358
(218) 456-2139 or 1-800-788-7784, (218) 456-2102 (fax)

Roseau Electric Cooperative

1107 Third Street N.E.
Roseau, MN 56751
(218) 463-1543 or 1-888-847-8840, (218) 463-3713 (fax)

Wild Rice Electric Cooperative

P.O. Box 438
Mahnomon, MN 56557-0438
(218) 935-2517 or 1-800-244-5709, (218) 935-2519 (fax)

PARTICIPATING MUNICIPAL UTILITIES

Bagley Public Utilities

P.O. Box M
Bagley, MN 56621
(218) 694-2300, (218) 694-6623 (fax)

Baudette Municipal Utilities

P.O. Box 548
Baudette, MN 56623
(218) 634-2432, (218) 634-9777 (fax)

Fosston Municipal Utilities

220 East 1st Street
Fosston, MN 56542
(218) 435-1737, (218) 435-1961 (fax)

Halstad Municipal Utilities

405 2nd Ave. West
Halstad, MN 56548
(218) 456-2128, (218) 456-2018 (fax)

Hawley Public Utilities

P.O. Box 69
Hawley, MN 56549
(218) 483-3331, (218) 483-3332 (fax)

Roseau Municipal Utilities

1198 Center Street West
Roseau, MN 56751
(218) 463-2351, (218) 463-1231 (fax)

Stephen Municipal Utilities

P.O. Box 630
Stephen, MN 56757
(218) 478-3614, (218) 478-3806 (fax)

Thief River Falls Municipal Utilities

P.O. Box 528
Thief River Falls, MN 56701
(218) 681-5816, (218) 681-8225 (fax)

Warren Municipal Utilities

120 East Bridge Ave.
Warren, MN 56762
(218) 745-5343, (218) 745-5344 (fax)



Residential Existing Homes Form

Customer Information (Please Print)

Name of Homeowner		Contact Phone		Contact Mobile	
Mailing Address		City	State		ZIP Code
Installation Address		City	State		ZIP Code
Email Address					
Electric Utility Name: _____ Account Number _____		Gas Utility Name: _____ Account Number _____		Building Type <input type="checkbox"/> Existing <input type="checkbox"/> New Construction	Building Use <input type="checkbox"/> Single Family <input type="checkbox"/> Multi-family How many units? ____
Fuel Type for Space Heating: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____					
Fuel Type for Water Heating: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____					
How did you learn about the program? <input type="checkbox"/> My Utility <input type="checkbox"/> Utility Web site <input type="checkbox"/> Newspaper <input type="checkbox"/> Community Event <input type="checkbox"/> Mail/Bill Insert <input type="checkbox"/> Contractor <input type="checkbox"/> Other: _____					

Contractor Information

Name of Installing Contractor (if applicable)		Contact Phone		Contact Mobile	
Contractor Address		City	State		ZIP

Equipment Information

A. Lighting Equipment				
Equipment Type	Specifications	Incentive	Quantity	Total
CFL Lamps-\$2 per bulb	Replace incandescent bulbs with ENERGY STAR® Compact Fluorescent Lamps (CFLs). Maximum 12 CFLs per customer.	\$2/bulb		
LED Recessed Downlights (complete fixture)	Replace 60-125W incandescent. Must be ENERGY STAR and or/Design Light Constortium approved	\$25/install		
LED Recessed Downlights (screw in replacement)	Replace 60-125W incandescent. Must be ENERGY STAR and or/Design Light Constortium approved	\$15/install		
B. Appliances				
Equipment Type	Specifications	Incentive	Quantity	Total
Clothes Washer	ENERGY STAR®	\$50/Unit		
Brand Installed	Model Number Installed	Serial Number Installed		
Clothes Dryer Fuel Source: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____				

C. Domestic Hot Water Measures					
Equipment Type	Specification	Incentive	Quantity	Total	
Electric Water Heater	Minimum 80 gallon total capacity, EF \geq 0.91. Must be controlled under the utility's load management program	\$150/Unit			
Brand Installed	Model Number Installed	Serial Number Installed			
Equipment Replaced <input type="checkbox"/> Electric Water Heater <input type="checkbox"/> Natural Gas Water Heater <input type="checkbox"/> LP Water Heater <input type="checkbox"/> Other: _____					
D. Programmable Thermostat					
Equipment Type	Specification	Incentive	Quantity	Total	
Programmable Thermostat		\$25/Unit			
Brand Installed	Model Number Installed				
E. Heating, Ventilation Air Conditioning Measures ¹					
Equipment Type	Specifications	AHRI/GAM A	Incentive/Unit	Quantity	Total
Supplemental Heating Source for Air-Source Heat Pump (ASHP)	Must modulate to allow ENERGY STAR-rated ASHP to operate down to 5°F, and be on load control		\$500		
Air-Source Heat Pump ³	14.0 SEER, 8.2 HSPF		\$250		
Furnace (Air Handler) with ECM blower ^{2,5,6}	Furnace with an ECM blower		\$150		
Mini Split/Ductless Air-Source Heat Pump ⁴	15 SEER		\$500		
<i>Information must be listed for the indoor, outdoor and furnace unit, unless an AHRI certificate can be produced without the furnace unit information:</i>					
Furnace Manufacturer:		Model Number(s) Installed:		Serial Number(s) Installed:	
Outdoor Unit Air Source Heat Pump Manufacturer:		Model Number(s) Installed:		Serial Number(s) Installed:	
Indoor Unit Air Source Heat Pump Manufacturer:		Model Number(s) Installed:		Serial Number(s) Installed:	
Equipment Removed: <input type="checkbox"/> Heat Pump <input type="checkbox"/> Electric Furnace <input type="checkbox"/> Natural Gas Furnace <input type="checkbox"/> LP Furnace <input type="checkbox"/> Other: _____					
F. Insulation and Air Sealing Measures					
Insulation and Air Sealing Measures	Specifications	Previous Condition	Post Installation Condition	Incentive offered	Total Incentive Paid
Interior Foundation Insulation	>R-5 continuous sidewall insulation (2x4 and 1/2" drywall) R-11 BATT insulation (2x4 and 1/2" drywall)			30% of insulation cost, maximum incentive \$400**	
Above Grade Sidewall Insulation*	>R-5 continuous sidewall insulation or dense pack			30% of insulation cost, maximum incentive \$400**	

Insulation and Air Sealing Measures	Specifications	Previous Condition	Post Installation Condition	Incentive offered	Total Incentive Paid
Attic Insulation*	Increase in measureable R-Value R-30---R-50			30% of insulation cost, maximum incentive \$400**	
Air Sealing/Infiltration Reduction	Reduced by 400 CFM or 25% of pre-test			30% of air sealing cost, maximum incentive \$150**	
Please note that in order to qualify for any air sealing, attic, foundation, or above-grade wall insulation incentive, a comprehensive energy assessment must be performed.					
**If self-installed, the maximum incentive is based on the material cost only (e.g. cost of insulation).					

Requirements

1. Must be installed by qualified, insured contractor. New installations only. Must be the primary heating source for the home and be on a list of prequalified units. All efficiency ratings will be verified using the AHRI database (ahridirectory.org).
2. New furnace/indoor unit installations only. Unit must be equipped with an electronically commutated motor (ECM) as original equipment in the furnace, heat pump or indoor blower. Must be the primary heating source for the home.
3. Qualifying units are standard split system, furnace integrated for homes with ductwork. Electricity must be a primary heating source in your new or existing home. Unit must be on a list of prequalified units. Units must be labeled as ENERGY STAR® qualified (current listing) or include proof of the following ratings: split-system installations must be rated with a minimum SEER of 14.0, a HSPF of 8.2, considering the evaporator coil, condenser coil and furnace. The furnace and condenser model and serial numbers, evaporator model and serial number, and AHRI reference number are required for all installations. All efficiency ratings will be verified using the AHRI database (ahridirectory.org) or manufacturer specifications.
4. Unit must be rated with a minimum SEER of 15.0 and be on a list of prequalified units. AHRI reference number are required for all installations. All efficiency ratings will be verified using the AHRI database (ahridirectory.org).
5. Indoor units that contain ECM motors which include, fuel-fired furnaces or air handlers with no secondary heating source, also qualify.
6. Indoor units that contain ECM motors with system ratings less than 14.0 SEER, 8.2 HSPF, would qualify under the \$150 furnace incentive.

A. Subtotal	B. Subtotal	C. Subtotal	D. Subtotal	E. Subtotal	F. Subtotal	Total Incentives
\$	\$	\$	\$	\$	\$	\$

Certifications and Signature

I hereby certify that: 1. The information contained in this application is accurate and complete; 2. All installation is complete and the unit(s) is operational prior to submitting application; and 3. All rules of this incentive program have been followed. 4. I have read and understand the terms and conditions included with this document.

I agree to verification of equipment installation, which may include a site inspection by a program or utility representative. I understand that I am not allowed to receive more than one incentive from this program on any piece of equipment. I hereby agree to indemnify, hold harmless and release the utility from any actions or claims in regard to the installation, operation and disposal of equipment (and related materials) covered herein, including liability from any incidental or consequential damages.

Customer Signature	Print Name	Date Equipment Installed:
		Date Submitted:

Program Use Only

Date Received:	Post Inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No	Incentive Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Approved:
Utility or Program Representative:			
Joint Program Tracking #			

Terms and Conditions

1. **Incentive Offer:** Projects must be implemented (completed) by **December 14, 2012**. An original signed application and invoices for materials and labor must be delivered to the participating utility at the address located on page 2 of this application **within 60 calendar days of installation (completion)**. Please keep a copy for your records.
2. **Proof of Purchase:** This application must have complete information and be submitted with an invoice itemizing the **new equipment purchased**. The manufacturer (OEM) specification sheet(s) are needed only if an AHRI certificate is not available. The invoice must indicate date of purchase, size, type, make, model and total project cost.
3. **Compliance:**
 - a. All projects are expected to comply with federal, state, and local codes.
 - b. All equipment must be new or retrofitted with new components per the program specifications. Used or rebuilt equipment is not eligible for incentives. Existing equipment must be removed or permanently disconnected.
 - c. Equipment must meet specification requirements and be purchased and operating prior to submitting an incentive application.
 - d. Customers may only receive one incentive per piece of qualifying equipment.
 - e. If the project is in a leased building, the term of the lease must be at least five (5) years.
4. **Payment:** Once completed paperwork is submitted, incentive payments are usually made within 45 calendar days. Incomplete applications will either delay payments or be denied. The participating utilities reserve the right to refuse payment and participation if the customer or contractor violates program rules and procedures. All projects exceeding \$5,000 in incentives will be inspected prior to incentive payment.
5. **Inspection:** Program staff may conduct an inspection of the facility to survey installed projects.
6. **Publicity:** The participating utilities reserve the right to publicize your participation in this program, unless you specifically request otherwise.
7. **Program Discretion:** Incentives are available on a first-come, first-served basis. This incentive is subject to change or termination without notice at the discretion of the participating utilities.
8. **Logo Use:** Customers or allies may not use the participating utilities' name or logo in any marketing, advertising, or promotional material without written permission.
9. **Disclaimers:** The participating utilities
 - a. Do not endorse any particular manufacturer, product, labor or system design by offering these programs;
 - b. Will not be responsible for any tax liability imposed on the customer as a result of the payment of incentives;
 - c. Do not expressly or implicitly warrant the performance of installed equipment or contractor's quality of work (contact your contractor for detailed warranties);
 - d. Is not responsible for the proper disposal/recycling of any waste generated as a result of this project;
 - e. Is not liable for any damage caused by the installation of the equipment or for any damage caused by the malfunction of the installed equipment.

INCENTIVE LIMIT:

Total incentives paid are limited to \$10,000 per customer per year. An incentive exceeding \$5,000 must receive written approval BEFORE project installation. Total incentive not to exceed 75 percent of the project cost.

ELIGIBILITY:

These incentives are offered by member utilities of the Minnkota Power Cooperative, Inc. and the Northern Municipal Power Agency. For questions regarding eligibility, call your local utility listed on page 2.