

Residential Weatherization Program—LIHEAP

PLEASE PRINT
MEMBER ADDRESS INFO (person receiving rebate)

| | | | |
|------------|-----------|----------------|--------------------------|
| First Name | Last Name | Account Number | Phone |
| Address | | City | State Zip E-mail Address |

EQUIPMENT LOCATION INFO

 Check if same address as above:

| | | | |
|------------|-----------|---------|--------------------------|
| First Name | Last Name | Account | Phone |
| Address | | City | State Zip E-mail Address |

Key Program Requirements:
(See full Terms and Conditions on separate sheet)

- Eligible for residential homes built before 1986
- Only residential upgrades qualify - no new additions
- Total project cost must be \$150 or more to be eligible
- Must have electric heat and/or central air conditioning
- Must qualify for Iowa LIHEAP program. LIHEAP qualification must be verified to receive identified rebate amounts.
- Weatherization materials or labor provided through a CAAP agency, or their agent, or any other organization cannot be claimed under this program.

| Type of Installation | Pre-Existing Requirement | Post-Install Minimum |
|-------------------------|--------------------------|--------------------------|
| Attic Insulation | Maximum R-20 | R-38 |
| Wall Insulation | Maximum R-13 | R-13 , Minimum R-5 added |
| Foundation Insulation | Maximum R-8 | R5, Minimum R-5 Added |
| Infiltration Control | NA | NA |
| Duct Insulation/Sealing | Unconditioned Space Only | R-8 |

PART I. PRE-APPROVAL APPLICATION

- Submit this application with Part I completed to East-Central Iowa Rural Electric Cooperative prior to beginning work. **Keep a copy of the application.**
- If your proposed project is pre-approved, you will be notified and provided with an expiration date.
- Upon pre-approval, you will have 6 months to install the proposed upgrades and submit a copy of the entire application.

Before beginning project, read Part II of this application and the Program Requirements to ensure that the final installation will qualify. Check that your contractor understands the rules for this program.

HEATING/COOLING SYSTEM TYPE (check one)

- Electric Heat** -check if electric system heats 75% of the home and operates prior to any non-electric backup. Portable space heaters do not qualify as part of the primary heating system. Air conditioning is not required.
- Central AC Only** -check if central air conditioning system provides cooling to the entire home (except basement) and the heating system does not qualify as Electric Heat. Homes heated with natural gas do not qualify for this program.

Equipment may be subject to cooperative inspection and minimum electrical use requirements.

YEAR HOUSE BUILT

INSTALLER OF UPGRADES (subject to change)

 Homeowner

 Contractor

Name (if known) _____

HOUSE SIZE (sq. ft.)

| Type of Installation | Area (sq. ft.) | Original Conditions | | | Proposed Upgrades | | | | |
|--------------------------|----------------|--------------------------|--------------------|---------|--------------------------|--------------------|---------------|--|--|
| | | Material/Insulation Type | Thickness (inches) | R-Value | Material/Insulation Type | Thickness (inches) | Added R-Value | Cost Estimate | |
| Attic/Ceil. Insulation | | | | | | | | | |
| Wall Insulation | | | | | | | | | |
| Foundation Insulation | | | | | | | | | |
| Infiltration Control | | | | | | | | | |
| Duct Insulation/Sealing* | | | | | | | | | |
| | | | | | | | | Total Estimated Installed Costs | |

*Must be performed by contractor

Further Description of Work _____

MEMBER AGREEMENT

I verify that the above information is true to the best of my knowledge. I agree to the Terms and Conditions for this program and all program requirements provided with this application. I also agree that my electric cooperative reserves the right to pre-inspect my home to verify existing conditions prior to beginning any work and prior to pre-approval of this project, and that I will assist East-Central Iowa Rural Electric Cooperative to verify my LIHEAP status if necessary.

Member Signature _____

Date _____

| | | | |
|-------------------------|----------------|---------------|--------|
| Office Use Only: | Cooperative ID | Employee Name | Notes: |
| Form R10-L 4-10 | | | |

Residential Weatherization Program—LIHEAP

Reservation Number

Reservation Start Date

6 Month Expiration Date

| MEMBER INFO (person receiving rebate) | |
|--|----------------|
| Last Name | Account Number |
| EQUIPMENT LOCATION INFO | |
| Last Name | Account Number |
| Check if same as above: <input type="checkbox"/> | |

PART II—REBATE APPLICATION (complete and submit after all work is final)

DATE INSTALLED Work must be performed after April 1, 2010.

| Type of Installation | Area (sq. ft.) | Installed Upgrades | | | Final R-Value |
|--------------------------|----------------|------------------------------------|--------------------|---------------|---------------|
| | | Description of Material/Insulation | Thickness (inches) | Added R-Value | |
| Attic/Ceiling Insulation | | | | | |
| Wall Insulation | | | | | |
| Foundation Insulation | | | | | |
| Infiltration Control | | | | | |
| Duct Insulation/Sealing* | | | | | |

*Must be performed by contractor

| Type of Installation | Total Cost (no labor if self-installed) | <i>Complete only the section below for the heating/cooling system applicable to your home.</i> | | | | | |
|--------------------------|---|--|----------------|---------|------------------------------|----------------|---------|
| | | Electric Heat | | | Propane Heat with Central AC | | |
| | | Rebate Calculation | Maximum Rebate | REBATE* | Rebate Calculation | Maximum Rebate | REBATE* |
| Attic/Ceiling Insulation | | Total Cost x 0.8 | \$800 | | Total Cost x 0.20 | \$150 | |
| Wall Insulation | | Total Cost x 0.8 | \$800 | | Total Cost x 0.20 | \$150 | |
| Foundation Insulation | | Total Cost x 0.8 | \$800 | | Not Available | NA | |
| Infiltration Control | | Total Cost x 0.8 | \$200 | | Not Available | NA | |
| Duct Insulation/Sealing* | | Total Cost x 0.8 | \$200 | | Not Available | NA | |
| TOTALS | | | \$2800 | | | \$300 | |

*Enter the lesser of calculated rebate and maximum amount for each type of installation

Invoice Requirements (Homeowners should inform their contractor of these requirements prior to the installation)

- Invoices must be provided with this application and confirm the total costs used to calculate rebates for each type of installation.
- Contractor invoices must be itemized with total costs (material and labor) shown for each qualifying installation type.

MEMBER AGREEMENT

I verify that the information provided on this application is true to the best of my knowledge. I agree to all requirements and specifications provided for this program, and that my electric cooperative reserves the right to inspect my home to verify the installation for which a rebate is being

Member Signature _____ **Date** _____

CONTRACTOR AGREEMENT

I verify that the information provided on this application is true to the best of my knowledge. This includes the original conditions described in the pre-approval section as well as the installed measures. I agree that all requirements and specifications provided for this program have been met.

Contractor Signature _____ **Date** _____

Submit application, Part I and Part II completed, with required invoices and signatures (both member and contractor).

| | | | | |
|-------------------------|----------------|--------|--------------|-----|
| Office Use Only: | Cooperative ID | Notes: | Reserved Amt | PMT |
| Form R10-L 4-10 | Employee Name | | | |

Program Offer: The Program covers products purchased and/or services rendered on or after April 1, 2010. Participants must qualify for lowa LIHEAP program at the time of installation. LIHEAP qualification must be verified to receive identified rebate amounts. Weatherization materials or labor provided through a CAAP agency, or their agent, or any other organization cannot be claimed under this program.

Rebate Amounts:

Rebates vary by installation type and by type of primary heating and cooling system (See Table 1). Maximum rebates are the maximum amounts allowed per home under this program for as long this program is offered. Rebate amounts are dependent upon current lowa LIHEAP qualification; otherwise standard Residential Weatherization rebate amounts will be applied.

House Requirements:

- Only residential homes built prior to 1986 will qualify.
- Residential home upgrades only - new additions do not qualify.

Primary Heating and Air Conditioning (AC) System

Homes must be heated primarily with electric heat or cooled with a central air conditioning system. Qualifying systems as defined for determining appropriate rebates for this program are shown below.

- Electric Heat - electric system heats 75% of the home and operates prior to any non-electric backup. Portable space heaters do not qualify as part of the primary heating system. Air conditioning is not required.
- Central AC Only - central air conditioning system provides cooling to the entire home (except basement) and the heating system does not qualify as Electric Heat.
- Homes with natural gas heating do not qualify (contact gas supplier for any rebates).
- Equipment is subject to cooperative inspection and minimum electrical use requirements.

Invoices

- Invoices must be provided with the application and confirm the total costs used to calculate rebates for each type of installation.
- Projects must have a total cost of \$150 or more and can include more than one type of installation as defined for this program.
- Contractor invoices must be itemized with total costs (material and labor) shown for each qualifying installation type.
- Homeowners should inform their contractor of these requirements prior to the installation.
- Homeowners cannot include labor in the total cost for self-installed projects.

Qualifying Installations

Insulation:

The original R-value for insulation in the home must be below certain levels and increased to minimum levels as shown on Table 2.

If R-values are unknown, Table 3 can be used. Multiply the insulation thickness by the appropriate R-Value/inch to determine the R-Value of insulation in the home. If unsure of the insulation material, take a sample to a local building supply store where someone can identify it. Descriptions of insulation materials can be found at <http://hes.lbl.gov/hes/glossary.html>.

Infiltration control:

This includes the installation of house wraps (such as Tyvek), vapor barriers, permanent weatherstripping, caulking and foam sealing. Temporary sealing such as removable strip caulking and plastic window covers do not qualify.

Duct Insulation/Sealing:

Professional installation is required. Only ducts located in an unconditioned space such as the attic or crawlspace will qualify. Work where both the ducts and heating system are located in the basement does not qualify. Duct sealing must be done using a mastic sealant. (cannot be sealed with duct tape).

Recommendations and Cautions:

Professional installation is recommended for most projects. Self-installers should acquire the necessary expertise to guarantee a quality installation and ensure that the resulting work will not compromise the safety and integrity of the home.

Most air leaks that cause drafts can be sealed without problems, but caution must be taken when tightening a home. Air pressure differences and inadequate ventilation can result in backdrafting of combustible appliances, moisture and condensation problems and unsafe levels of contaminants including carbon monoxide and radon.

When adding insulation, caution should be taken to avoid creating a vapor barrier that can trap moisture inside building components. For example, rigid board insulation added to the outside of an insulated wall, without a vapor barrier on the interior side of the wall, can become the primary vapor barrier where condensation can occur.

See General Terms and Conditions and rules regarding pre-approval on the reverse side ...

Table 1. LIHEAP QUALIFIED REBATE AMOUNTS

| Type of Installation | Primary Heating/Cooling System | |
|--------------------------|--------------------------------|-----------------|
| | Electric Heat | Central AC Only |
| Attic/Ceiling Insulation | 80% up to | 20% up to |
| Wall Insulation | 80% up to | 20% up to |
| Foundation Insulation | 80% up to \$800 Max. | NA |
| Infiltration Control | 80% up to \$200 Max. | NA |
| Duct Insulation/Sealing | 80% up to \$200 Max. | NA |
| TOTAL | \$2800 Maximum | \$300 Maximum |

Table 2. REQUIRED INSULATION LEVELS

| Type of Installation | Pre-Existing Maximum | Post-Install Minimum |
|-------------------------|----------------------|----------------------|
| Attic Insulation | R-20 | R-38 |
| Wall Insulation | R-13 | R-13, Add R-5 Min. |
| Foundation Insulation | R-8 | R5, Add R-5 Min. |
| Duct Insulation/Sealing | R-3 | R-8 |

Table 3. TYPICAL R-VALUES FOR INSULATION

| Insulation Type | R-value / inch (OLD) | R-value / inch (NEW) |
|--------------------------------|----------------------|----------------------|
| Flexible Batts | | |
| Fiberglass | 2.6 | 3.2 |
| Rockwool | 3.1 | 3.6 |
| Loose-Fill | | |
| Cellulose | 3.2 | 3.5 |
| Fiberglass | 2.0 | 2.4 |
| Rockwool | 2.4 | 2.9 |
| Perlite | 2.3 | 2.7 |
| Vermiculite | 2.0 | 2.4 |
| Rigid Foam Boards | | |
| Polystyrene, molded (beaded) | | 4.0 |
| Polystyrene, extruded (smooth) | | 5.0 |
| Polyurethane | | 6.0 |
| Polyisocyanurate | | 8.0 |
| Spray Foam Insulation | | |
| Urethane | | 6.0 |
| Foam Roofing | | 8.0 |

From Home Energy Saver website (sponsored by ENERGY STAR)

Pre-Approval

1. Pre-approval is not required to participate in the program, however it is highly recommended due to limited funding for this program. If a project is pre-approved, funds will be reserved for 6 months. The installation must be completed and the final Application (with Part II of the form completed) must be submitted to East-Central Iowa Rural Electric Cooperative by the end of this period.
2. As long as there remains funding for this program, a member can reserve funds for their project. Reservation of funds can occur at any stage of the project (from planning to completion).
3. Pre-approval does not guarantee payment of rebates. Rebates will only be paid on work meeting all requirements specified for this program.
4. If the funding limit for this program has been reached, funding for reserved projects will take priority and requests for rebates on qualifying projects without pre-approval will be placed on a waiting list. Projects on a waiting list may become eligible for rebates if funds become available.

General Program Terms and Conditions:

Application Information: Missing or incorrect information on the application may delay or halt processing and delivery of the Program Incentive. Contact East-Central Iowa Rural Electric Cooperative for questions regarding the processing of the application.

Warranty Information: East-Central Iowa Rural Electric Cooperative makes no warranties, expressed or implied, with respect to equipment operation, material, workmanship or manufacturing. East-Central Iowa Rural Electric Cooperative does not guarantee a certain level of energy or cost savings resulting from use of products covered by this program.

Limitation of Liability: Participating Members agree that East-Central Iowa Rural Electric Cooperative's liability, in connection with this Program, is limited to paying the Program Incentive specified (when all Terms and Conditions have been satisfied by the member). Under no circumstances shall East-Central Iowa Rural Electric Cooperative be liable for any consequential or incidental damages resulting from participation in this Program. East-Central Iowa Rural Electric Cooperative will not be responsible for any tax liability that may be imposed on the Participating Member as a result of the payment of Program Incentives.

Participating Member's Certification: Participating Member certifies that all measures and/or equipment specified will be applied and used only at the defined location served by East-Central Iowa Rural Electric Cooperative and provided in the application. Participating Member agrees that all information provided is true and that he/she has conformed to all of the program requirements listed in the application and has conformed to any applicable codes required by local, state or other governing bodies.

Program Changes/Termination: While this rebate program will be in effect for an indefinite period, East-Central Iowa Rural Electric Cooperative reserves the right to extend, modify (this includes incentive levels) or terminate this Program without prior or further notice. The member is responsible for checking with East-Central Iowa Rural Electric Cooperative to determine whether the program has been changed or is still in effect. Past eligibility, does not guarantee that equipment will meet criteria for current programs in effect.

Other Conditions: East-Central Iowa Rural Electric Cooperative reserves the right to inspect installations before issuing the rebate. If the application or installation does not comply with East-Central Iowa Rural Electric Cooperative's rules and qualifications, the rebate amount may be adjusted.

Members must apply for rebates within 6 months of the purchase date (as shown on the member's invoice). To be eligible for reserved funds, however, a member must apply before their reservation has expired.

See specific Program Requirements and recommendations on the reverse side ...

Member Signature

Date