



HEAT PUMP WATER HEATER FORM

All sections must be filled out by the installer at the time of installation. A copy of this completed form, the purchase receipt or invoice, and the manufacturer's Installation Checklist (if applicable) must be submitted to Clark Public Utilities in accordance with utility policy. A model's qualification is determined based on the assigned tier at date of purchase.

Rebate Amounts & Eligible Home Types (Select One)		
<input type="checkbox"/> \$150 (Tier 1)	<input type="checkbox"/> \$300 (Tier 2-4, new construction)	<input type="checkbox"/> \$500 (Tier 2-4, existing home)*

Household information				
Customer Name	Installation Address	City	State	Zip
Phone	Mailing Address	City	State	Zip
Email:		Year Home Built: _____ Heated Area (Square Feet): _____ Existing Site Built <input type="checkbox"/> New Site Built <input type="checkbox"/> Manufactured <input type="checkbox"/>		
Heating system: <input type="checkbox"/> Electric Furnace <input type="checkbox"/> Electric Zonal <input type="checkbox"/> Ductless Heat Pump <input type="checkbox"/> Air source Heat Pump <input type="checkbox"/> Electric Furnace w/ AC <input type="checkbox"/> Gas Furnace <input type="checkbox"/> Geothermal HP <input type="checkbox"/> Other Non-Electric (specify):				
Foundation Type (site built only): <input type="checkbox"/> Crawlspace <input type="checkbox"/> Full Basement <input type="checkbox"/> Half Basement <input type="checkbox"/> Slab				
Number of occupants:		Number of water heaters: ____ Before this Installation ____ After this Installation		
About the Water heater being replaced (this row only):		Fuel <input type="checkbox"/> Elec <input type="checkbox"/> Gas* <input type="checkbox"/> Prop*	Age (yrs):	Size (gallons):
				Functional? <input type="checkbox"/> yes <input type="checkbox"/> no
* In existing homes, the heat pump water heater must replace an electric storage water heater on a one-to-one basis.				

Installation Information			
Brand Installed	Model	Size (gallons):	Date of installation:
Other Appliances in installation room: <input type="checkbox"/> clothes dryer <input type="checkbox"/> fridge <input type="checkbox"/> freezer <input type="checkbox"/> furnace <input type="checkbox"/> other (specify):			
Where was this water heater purchased? <input type="checkbox"/> installer <input type="checkbox"/> retailer <input type="checkbox"/> online <input type="checkbox"/> Other:			
Total installed cost (before rebates): \$_____ Break down cost into the categories below: Equipment: \$_____ Labor: \$_____ Electrical: \$_____ Other: \$_____ Specify:			
Installation location: <input type="checkbox"/> Conditioned Space - heated area of the home (example: heated basement, interior closet, etc.) <input type="checkbox"/> Unconditioned Space – unheated area of home (example: garage, unheated basement, attic) Specify: <input type="checkbox"/> Garage <input type="checkbox"/> Basement <input type="checkbox"/> Closet <input type="checkbox"/> Utility room <input type="checkbox"/> Laundry room <input type="checkbox"/> Other:			
Installation room size: (length _____) x (width _____) x (height _____) = _____ cu.ft.			
Installation clearances: ____ air inlet side (ft) ____ air outlet side (ft) ____ back (in) ____ front (ft) ____ top (in)			
Ducted Installations:	CO Monitor Location:	Ducted out of conditioned space? <input type="checkbox"/> Yes <input type="checkbox"/> No	Length of intake duct (ft): _____ Length of exhaust duct (ft): _____

Installation Checklist (complete in addition to the manufacturer's checklist)

Follow the manufacturer's installation instructions <u>exactly</u>. Failure to do so will result in disqualification from the program, may void the manufacturer's warranty, and may result in lower than expected energy savings.	
<input type="checkbox"/> There is adequate clearance to remove the air filter	<input type="checkbox"/> Homeowner is aware of cooling effect and noise levels to expect in the installation area
<input type="checkbox"/> Earthquake strapping is installed	<input type="checkbox"/> Homeowner understands maintenance requirements
<input type="checkbox"/> Installation complies with code	<input type="checkbox"/> Homeowner understands the safety instructions
<input type="checkbox"/> Condensate line drains at a slope to a drain or exterior location	<input type="checkbox"/> Temperature and Pressure relief valve is properly installed and not plugged

Required Customer and Technician Signatures. Both homeowner and installer signatures are required. If installed by the homeowner, the homeowner must also complete and sign the installer section below. Manufacturer training (in-person or online video if available) is required of non-contractors (homeowner self-installed) and contractors. The training information fields below are required in order to process rebate packets for heat pump water heaters that have training available from the manufacturer.

By signing below, the homeowner certifies that they understand and agree that they may be contacted for the purpose of scheduling an on-site installation quality assurance visit by a representative of the Heat Pump Water Heater (HPWH) program. This form must be signed by the person whose name appears on the electric utility account. ENERGY INFORMATION RELEASE: The undersigned utility customer requests and authorizes the specified utility to release billing and usage information for the account listed below to the HPWH program. With this authorization, the HPWH program can request billing information for up to two years pre-installation and two years post-installation. The utility customer also hereby releases the utility company from any and all liability arising from or connected with providing this information.	
<input type="checkbox"/> A copy of the purchase receipt or installer's invoice is included with this application.	
<input type="checkbox"/> A completed copy of the manufacturer's Installation Checklist is included with this application.	
Electric Utility:	Account #:
Account holder name:	
Account holder signature:	Date:
By signing below, installer certifies that this form and any accompanying documentation are complete and accurate; that all measures associated with this project were completed as of the signature date below; that all equipment was installed according to the manufacturer's specifications and any additional specifications required by Bonneville Power Administration; and that unit is functional and operational prior to submission of this rebate form.	
Manufacturer Training Location: (if training was online video, write website name)	Date of Training: (or viewing date)
Installation Company:	Installer Phone #:
<input type="checkbox"/> Contractor <input type="checkbox"/> Non-contractor or Homeowner	
Installer signature:	Date:

PRIVACY ACT STATEMENT Basic authority for collecting this information is authorized by 16 U.S.C. §§ 832 et. seq., and 838 et. seq., pursuant to Bonneville Power Administration's Conservation Program system of records established in 46 FR 31700. This information is primarily intended to further, but is incidental to the performance of, BPA's overall Energy Efficiency Program, the objective of which is to acquire energy resources through energy efficiency, to determine what cost-effective conservation and direct application renewable resources measures should be installed or adopted under different circumstances, and to provide incentives for the installation of such measures. Other routine issues of this information include: aggregation into a public database on energy efficiency; furnished to authorized personnel for installation/repair of equipment; aggregated into a database for program publicity; and in some instances information regarding buildings will be made available to subsequent purchasers of the buildings. Your disclosure of the requested information is voluntary; however failure to provide requested information means that it will not be possible for you to participate in this BPA Energy Efficiency program.

Please return this form to:
 CLARK PUBLIC UTILITIES **ATTN: REBATES**
 PO BOX 8900
 VANCOUVER, WA 98668

Questions? Please contact us:
 EMAIL: rebates@clarkpud.com
 PHONE: 360-992-3422