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| Description: H:\People\Sam Rivers\B not useful\MEA-logo-SAM2.png | **2017 Clean Energy Communities Grant Program****Monthly Energy Metrics Worksheet** |
| **ATTACHMENT C** |
| Your provision of information on the specific energy measures installed with grant funds enables MEA to calculate the energy savings achieved through the grant.  |

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| **PART I: GRANTEE REPORTING INFORMATION** |
| 1. **Reporting Period:**
 | 1. **Organization Information:**
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|  |  |  |  |  |  |
| **Month** | **Year** | **Organization Name** | **County where work is being performed** | **Organization Point of Contact** | **Grant Number** |
| **Type of Electric Utility Account: 🞎 Residential 🞎 Commercial** |

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| **PART II: ENERGY METRICS REPORTING- RESIDENTIAL ENERGY MEASURES** |
|  | Please select (by checking the box) and complete the fields for the measures that have been ***completed*** ***during this reporting month only.*** |

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| 1. **LIGHTING**
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| **🞎** | CFL | Residential ***interior*** screw-in “bulbs” | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| **🞎** | CFL | Residential ***exterior*** screw-in “bulbs” | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| **🞎** | CFL | Residential ***interior***hard-wire fixtures | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| **🞎** | CFL | Residential ***exterior***hard-wire fixtures | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| **🞎** | LED | Residential ***interior*** lighting | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| **🞎** | LED | Residential  ***exterior***lighting | Please provide the wattage and number of installed units of each wattage: |  |  |  |  |  |  |
| # OF UNITS | WATTAGE | # OF UNITS | WATTAGE | # OF UNITS | WATTAGE |

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| 1. **APPLIANCES**
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| **🞎** | REFRIGERATOR |  ENERGY STAR  | Number of *ENERGY STAR* rated refrigerators replaced during reporting month:  |  | Of the ENERGY STAR refrigerators installed during the reporting month, please indicate the number of refrigerators that are also CEE Tier 2 rated: |  |
| CEE Tier 2 Status |

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| **🞎** | CLOTHES WASHER(in a home with an electric water heater) | ENERGY STAR  | Number of washers replaced during reporting month: |  | Of the ENERGY STAR clothes washers installed during the reporting month, please indicate the number of units that are also CEE TIER 3 rated: |  |
| CEE TIER 3 Status |

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| **🞎** | CLOTHES WASHER (in a home with a fossil fuel water heater) | ENERGY STAR | Number of washers replaced during reporting month: |  | Of the ENERGY STAR clothes washers installed during the reporting month, please indicate the number of units that are also CEE TIER 3 rated: |  |
| CEE TIER 3 Status |

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| **🞎** | DISHWASHER (in a home with an electric water heater) | ENERGY STAR Certified | Number of dishwashers replaced during reporting month: |  |

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| **🞎** | DISHWASHER (in a home with a fossil fuel water heater) | ENERGY STAR Certified | Number of dishwashers replaced during reporting month: |  |

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| 1. **HEATING, VENTILATION & AIR CONDITIONING (HVAC)**
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| **🞎** | WINDOW AIRCONDITIONING UNIT | ENERGY STARCertified | Number of units installed during reporting month: |  |
| Please provide the unit size (BTU/Hour) and number of installed units of each size: [Note: 1 ton = 12,000 BTU/Hour] |  |  | > 5 years old> 10 years old> 15 years old |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | BTU/HOUR | Equipment Age (circle) | # OF UNITS | BTU/HOUR | Equipment Age |
|  |  | > 5 years old> 10 years old> 15 years old |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | BTU/HOUR | Equipment Age (circle) | # OF UNITS | BTU/HOUR | Equipment Age |

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| **🞎** | CENTRAL AIR CONDITIONING (CAC) | ENERGY STAR Certified | ***NOTE:*** During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide ***system capacity (in BTH/Hour)***, ***Seasonal Energy Efficiency Rating (SEER)***, and ***number of installed units of each capacity/rating***: [Note: 1 ton = 12,000 BTU/Hour] |
|  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | BTU/HR | SEER | Equipment Age(circle) | # OF UNITS | BTU/HR | SEER | Equipment Age(circle) | # OF UNITS | BTU/HR | SEER | Equipment Age(circle) |
|  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | BTU/HR | SEER | Equipment Age(circle) | # OF UNITS | BTU/HR | SEER | Equipment Age(circle) | # OF UNITS | BTU/HR | SEER | Equipment Age(circle) |

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| **🞎** | AIR SOURCE HEAT PUMP | ENERGY STARCertified | ***NOTE:*** During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide ***system capacity (in Tons)***, ***Seasonal Energy Efficiency Rating (SEER)***, ***Regular Energy Efficiency Rating (EER)***, ***Heating Seasonal Performance Factor (HSPF)*** and ***number of installed units of each capacity/rating***: [Note: 1 ton = 12,000 BTU/Hour] |
|  |  |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | TONS | SEER | EER | HSPF | Equipment Age(circle) | # OF UNITS  | TONS | SEER | EER | HSPF | Equipment Age(circle) |
|  |  |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | TONS | SEER | EER | HSPF | Equipment Age(circle) | # OF UNITS  | TONS | SEER | EER | HSPF | Equipment Age(circle) |

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| **🞎** | DUCTLESS MINI-SPLIT HEAT PUMP | ENERGY STARCertified | ***NOTE:*** During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide ***system capacity (in Tons)***, ***Seasonal Energy Efficiency Rating (SEER)***, ***Regular Energy Efficiency Rating (EER)***, ***Heating Seasonal Performance Factor (HSPF)*** and ***number of installed units of each capacity/rating***: [Note: 1 ton = 12,000 BTU/Hour] |
|  |  |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | TONS | SEER | EER | HSPF | Equipment Age(circle) | # OF UNITS  | TONS | SEER | EER | HSPF | Equipment Age(circle) |
|  |  |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  |  |  | > 5 years old> 10 years old> 15 years old |
| # OF UNITS | TONS | SEER | EER | HSPF | Equipment Age(circle) | # OF UNITS  | TONS | SEER | EER | HSPF | Equipment Age(circle) |

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| **🞎** | GAS FURNACE | ENERGY STARCertified | ***NOTE:*** During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide ***system heat capacity (BTU/Hour)***, the ***Annual Fuel Utilization Efficiency (AFUE)***, and the ***number of installed units of each capacity/rating***: |
|  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |
| # OF UNITS | BTU/HR | AFUE | Equipment Age(circle) | Fuel Type(circle) | # OF UNITS | BTU/HR | AFUE | Equipment Age(circle) | Fuel Type(circle) |
|  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |
| # OF UNITS | BTU/HR | AFUE | Equipment Age(circle) | Fuel Type(circle) | # OF UNITS | BTU/HR | AFUE | Equipment Age(circle) | Fuel Type(circle) |

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| --- | --- | --- | --- |
| **🞎** | BOILER (GAS & OIL) | ENERGY STARCertified | ***NOTE:*** During projects of this nature, several different types of units with different ratings can be installed within the same reporting period. In the spaces below, please provide ***system heat capacity (BTU/Hour)***, the ***Annual Fuel Utilization Efficiency (AFUE)***, and the ***number of installed units of each capacity/rating***. Please also verify (by selecting the appropriate box), if the boiler is gas or oil fueled: |
|  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |
| # OF UNITS | BTU/HOUR | AFUE | Equipment Age(circle) | Fuel Type(circle) | # OF UNITS | BTU/HOUR | AFUE | Equipment Age(circle) | Fuel Type(circle) |
|  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |  |  |  | > 5 years old> 10 years old> 15 years old | Natural GasFuel OilPropane |
| # OF UNITS | BTU/HOUR | AFUE | Equipment Age(circle) | Fuel Type(circle) | # OF UNITS | BTU/HOUR | AFUE | Equipment Age(circle) | Fuel Type(circle) |

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| **🞎** | PROGRAMMABLE THERMOSTATS (homes with fossil fuel heating only) | Total number of thermostats installed during reporting month in homes with fossil fuel heating only: |  |

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| 1. **Water Heating**
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| **🞎** | HEAT PUMP WATER HEATERS | ENERGY STAR Certified | Number of water heaters installed during reporting month: |  |
| For the locations with replaced/installed heat pump electric water heaters, please ***indicate the number of homes by each heating type***: |  |  |  |
| Electric Resistance Heating | Heat Pump Heating | Fossil Fuel Heating  |

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| **🞎** | NATURAL GAS WATER HEATERS | ENERGY STARCertified | ***NOTE:*** During projects of this nature, several different types of units with different values can be installed within the same reporting period. In the spaces below, please provide the ***energy factor (EF)*** and the ***number of units*** of each factor. Make sure to add the correct information to the appropriate type of water heating system indicated below ***(tank, condensing, or tankless)***: |
| **Tank or Condensing Natural Gas Water Heater****(*NOTE:* minimum EF = 0.67)** |
|  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |
| # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) | # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) | # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) |
|  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |
| # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) | # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) | # OF UNITS | EF | Equipment Age(circle) | Size (Gallons) |
| **Instantaneous Natural Gas Water Heater****(*NOTE:* minimum EF = 0.80)** |
|  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |
| # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) | # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) | # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) |
|  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |  |  | > 5 years old> 10 years old> 15 years old |  |
| # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) | # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) | # OF UNITS | EF | Equipment Age(circle) | Size (BTUs) |

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| **🞎** | WATER HEATER INSULATION BLANKETS | ***NOTE:*** During projects of this nature, different types of blankets with different costs can be installed within the same reporting period. In the spaces below, please provide the ***actual installation cost,*** the ***type of water heater within the home,*** and the ***number of units*** of each cost/water heater.  |
|  | **🞎** | **🞎** |  | **🞎** | **🞎** |
| # OF UNITS | ELECTRIC TANK | NATURAL GAS TANK | # OF UNITS | ELECTRIC TANK | NATURAL GAS TANK |

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| **🞎** | HOT WATER PIPE INSULATION | ***NOTE:*** During projects of this nature, the amount of installed pipe insulation may vary between locations within the same reporting period. In the spaces below, please provide the ***R-Value of the insulation, the circumference of piping being insulated*** *(1/2 inch, ¾ inch, or 1 inch)****,*** the ***type of water heater within the home,*** and the ***length of pipe insulation (in feet)***. |
|  |  |  | **🞎** | **🞎** |  |  |  | **🞎** | **🞎** |
| LENGTH (FT) | R-VALUE | PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch) | ELECTRIC | NATURAL GAS | LENGTH (FT) | R-VALUE | PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch) | ELECTRIC | NATURAL GAS |
|  |  |  | **🞎** | **🞎** |  |  |  | **🞎** | **🞎** |
| LENGTH (FT) | R-VALUE | PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch) | ELECTRIC | NATURAL GAS | LENGTH (FT) | R-VALUE | PIPE CIRCUMFERENCE (1/2 inch, 3/4 inch or 1 inch) | ELECTRIC | NATURAL GAS |

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| **🞎** | LOW FLOW SHOWERHEADS | Total number of showerheads installed during reporting month in homes with ***electric water heaters:***  |  |
| Total number of showerheads installed during reporting month in homes with ***natural gas water heaters:***  |  |

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| --- | --- | --- | --- |
| **🞎** | FAUCET AERATORS (LOW FLOW FAUCETS) | Total number of faucets installed during reporting month in homes with ***electric water heaters:***  |  |
| Total number of faucets installed during reporting month in homes with ***natural gas water heaters:***  |  |

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| 1. **Home Envelope**
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| **🞎** | WINDOWS | ENERGY STAR Certified | ***NOTE:*** During projects of this nature, installed windows may vary from location to location within the same reporting period. In the spaces below, please provide for each residence the ***type of heating used in the home, total square feet of windows installed, type of heating system (if electric heating), and indicate if the home has air conditioning***.  |

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| RESIDENCE 1(WINDOWS): |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |
| **YES** | **NO** |
| SQ. FEET OF WINDOWS INSTALLED | NAT. GAS HEATING | HEAT PUMP (IF ELECTRIC) | RESISTANCE (IF ELECTRIC) | AIR CONDITIONING? |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| RESIDENCE 2(WINDOWS): |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |
| **YES** | **NO** |
| SQ. FEET OF WINDOWS INSTALLED | NAT. GAS HEATING | HEAT PUMP (IF ELECTRIC) | RESISTANCE (IF ELECTRIC) | AIR CONDITIONING? |

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| **🞎** | RESIDENTIAL AIR SEALING | ***NOTE:*** During projects of this nature, air sealing projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate ***blower door, air conditioning, heating, and building height information*** for each residence that received air sealing.  |

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| RESIDENCE 1 (AIR SEALING): |
| BEFORE AND AFTER BLOWER DOOR RESULTS | AIR CONDITIONING? | AGE OF AC EQUIPMENT(Leave blank if no AC) | TYPE OF HEATING | FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT | HOME HEIGHT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎**  | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING (CFM50) | AFTER SEALING (CFM50) | YES | NO | PRE-2006 | 2006 & LATER | ELECTRIC(HEAT PUMP) | ELECTRICRESISTANCE HEAT | FOSSIL FUEL | PRE-2006 | 2006 & LATER | # OF STORIES |

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| RESIDENCE 2 (AIR SEALING): |
| BEFORE AND AFTER BLOWER DOOR RESULTS | AIR CONDITIONING? | AGE OF AC EQUIPMENT(Leave blank if no AC) | TYPE OF HEATING | FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT | HOME HEIGHT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎**  | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING (CFM50) | AFTER SEALING (CFM50) | YES | NO | PRE-2006 | 2006 & LATER | ELECTRIC(HEAT PUMP) | ELECTRICRESISTANCE HEAT | FOSSIL FUEL | PRE-2006 | 2006 & LATER | # OF STORIES |

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| RESIDENCE 3 (AIR SEALING): |
| BEFORE AND AFTER BLOWER DOOR RESULTS | AIR CONDITIONING? | AGE OF AC EQUIPMENT(Leave blank if no AC) | TYPE OF HEATING | FOR FOSSIL FUEL AND HEAT PUMP, AGE OF EQUIPMENT | HOME HEIGHT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎**  | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING (CFM50) | AFTER SEALING (CFM50) | YES | NO | PRE-2006 | 2006 & LATER | ELECTRIC(HEAT PUMP) | ELECTRICRESISTANCE HEAT | FOSSIL FUEL | PRE-2006 | 2006 & LATER | # OF STORIES |

|  |  |  |
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| **🞎** | ATTIC & CEILING INSULATION | ***NOTE:*** During projects of this nature, insulation projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate ***R-value, air conditioning, heating, and coverage area*** pertaining to each residence that received attic/ceiling insulation.  |

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| RESIDENCE 1 (ATTIC/CEILING INSULATION): |
| **FIBERGLASS (BATT) INSULATION INFORMATION (*if applicable*)** | **CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (*if applicable*)** |
| INSULATION R-VALUE | AREA COVERED BY NEW INSULATION | INSULATION R-VALUE | AREA COVERED BY NEW INSULATION |
|  |  |  |  |  |  |
| PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT | SQUARE FEET | PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT | SQUARE FEET |
| AIR CONDITIONING IN HOME? | AGE OF AC EQUIPMENT (leave blank if no AC) | HEATING IN HOME? | TYPE OF HEATING (leave blank if no heating) |  |
| **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |
| YES | NO | PRE-2006 | 2006 & LATER | YES | NO | FOSSIL FUEL | RESISTANCE | ELECTRIC | PRE-2006 | 2006 & LATER |

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| RESIDENCE 2 (ATTIC/CEILING INSULATION): |
| **FIBERGLASS (BATT) INSULATION INFORMATION (*if applicable*)** | **CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (*if applicable*)** |
| INSULATION R-VALUE | AREA COVERED BY NEW INSULATION | INSULATION R-VALUE | AREA COVERED BY NEW INSULATION |
|  |  |  |  |  |  |
| PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT  | SQUARE FEET | PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT | SQUARE FEET |
| AIR CONDITIONING IN HOME? | AGE OF AC EQUIPMENT (leave blank if no AC): | HEATING IN HOME? | TYPE OF HEATING (leave blank if no heating): | IF ELECTRIC, AGE OF HEAT EQUIPMENT |
| **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |
| YES | NO | PRE-2006 | 2006 & LATER | YES | NO | FOSSIL FUEL | RESISTANCE | ELECTRIC | PRE-2006 | 2006 & LATER |

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| RESIDENCE 3 (ATTIC/CEILING INSULATION): |
| **FIBERGLASS (BATT) INSULATION INFORMATION (*if applicable*)** | **CELLULOSE/FOAM (BLOWN/SPRAYED) INSULATION INFORMATION (*if applicable*)** |
| INSULATION R-VALUE | AREA COVERED BY NEW INSULATION | INSULATION R-VALUE | AREA COVERED BY NEW INSULATION |
|  |  |  |  |  |  |
| PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT | SQUARE FEET | PRE-EXISTING (R-VALUE) | INSULATION R-VALUE AFTER RETROFIT | SQUARE or LINEAR FEET |
| AIR CONDITIONING IN HOME? | AGE OF AC EQUIPMENT (leave blank if no AC): | HEATING IN HOME? | TYPE OF HEATING (leave blank if no heating): | IF ELECTRIC, AGE OF HEAT EQUIPMENT |
| **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |
| YES | NO | PRE-2006 | 2006 & LATER | YES | NO | FOSSIL FUEL | RESISTANCE | ELECTRIC | PRE-2006 | 2006 & LATER |

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| **🞎** | RESIDENTIAL DUCT SEALING | ***NOTE:*** During projects of this nature, duct sealing projects may vary in scope from location to location within the same reporting period. In the spaces below, please provide the appropriate ***distribution efficiency, air conditioning, and heating*** for each residence that received duct sealing.  |
| Distribution efficiency ratings can be obtained from the Building Performance Institute’s Distribution Efficiency Lookup Table available at: <http://www.bpi.org/web%20Download/BPI%20Standards/Heating%20Professional_11-20-07.pdf> on page 7. | **Note:** 1 ton = 12,000 BTU/HR |

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| RESIDENCE 1 (DUCT SEALING): |
| DISTRIBUTION EFFICIENCY (%)1 | AIR CONDITIONING? | AGE OF AC EQUIPMENT | SIZE OF AC EQUIPMENT | HEATING? | TYPE OF HEATING | AGE OF HEATING EQUIPMENT | CAPACITY OF HEATING EQUIPMENT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING  | AFTER SEALING | YES | NO | PRE-2006 | 2006 & LATER | BTU/HOUR | YES | NO | NATURAL GAS | ELECTRIC(HEAT PUMP) | PRE-2006 | 2006 & LATER | BTU/HOUR |

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| --- |
| RESIDENCE 2 (DUCT SEALING): |
| DISTRIBUTION EFFICIENCY (%)1 | AIR CONDITIONING? | AGE OF AC EQUIPMENT | SIZE OF AC EQUIPMENT | HEATING? | TYPE OF HEATING | AGE OF HEATING EQUIPMENT | CAPACITY OF HEATING EQUIPMENT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING  | AFTER SEALING | YES | NO | PRE-2006 | 2006 & LATER | BTU/HOUR | YES | NO | NATURAL GAS | ELECTRIC(HEAT PUMP) | PRE-2006 | 2006 & LATER | BTU/HOUR |

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| --- |
| RESIDENCE 3 (DUCT SEALING): |
| DISTRIBUTION EFFICIENCY (%)1 | AIR CONDITIONING? | AGE OF AC EQUIPMENT | SIZE OF AC EQUIPMENT | HEATING? | TYPE OF HEATING  | AGE OF HEATING EQUIPMENT | CAPACITY OF HEATING EQUIPMENT |
|  |  | **🞎** | **🞎** | **🞎** | **🞎** |  | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** | **🞎** |  |
| BEFORE SEALING  | AFTER SEALING | YES | NO | PRE-2006 | 2006 & LATER | BTU/HOUR | YES | NO | NATURAL GAS | ELECTRIC(HEAT PUMP) | PRE-2006 | 2006 & LATER | BTU/HOUR |

|  |  |  |  |
| --- | --- | --- | --- |
| **🞎** | WALL & FLOOR INSULATION | WALL INSULATION INFORMATION | FLOOR INSULATION INFORMATION |
|  |  |  |  |
| Area covered with Insulation (Sq ft) | Insulation Type | Area covered with Insulation (Sq ft) | Insulation Type |
|  |  |

|  |  |
| --- | --- |
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| --- | --- |
|  |  |

 |
| Insulation Thickness (inches) | R-Value of Insulation | Insulation Thickness (inches) | R-Value of Insulation |
| Provide Fuel Type |  |  |  |
| Natural Gas | Fuel Oil | Propane |

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| **PART III: ENERGY METRICS REPORTING - COMMERCIAL ENERGY MEASURES** |
| Due to the wide range of possible commercial energy projects, the energy reporting metrics for commercial EmPOWER Clean Energy Communities Low-to-Moderate Grant projects will be determined on a case by case basis.  |

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| **COMMERCIAL LIGHTING** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **🞎** | T12 to T8 | Commercial ***interior*** Fluorescent Fixture Retrofit | Please provide the quantity of fixtures and attach a detailed line by line lighting audit with project details |  |
| # OF FIXTURES |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **🞎** | T8 toLow Power T8 | Commercial ***interior*** Fluorescent Fixture Retrofit | Please provide the quantity of fixtures and attach a detailed line by line lighting audit with project details |  |
| # OF FIXTURES |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **🞎** | T12 or T8 to LED | Commercial ***interior*** Fluorescent Fixture Retrofit | Please provide the quantity of fixtures and attach a detailed line by line lighting audit with project details |  |
| # OF FIXTURES |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **🞎** | New Fixtures (Fluorescent, CFL, HID) | Commercial ***interior or exterior***Fluorescent Fixture Retrofit | Please provide the quantity of fixtures and attach a detailed line by line lighting audit with project details |  |
| # OF FIXTURES |

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| --- |
| **MEASURE CATEGORY 2: Other Measures**To determine savings associated with the installation of measures not itemized on Attachment C, MEA will require third party verification. Please provide details below on the measure to enable savings calculations. |

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| --- | --- | --- |
| **🞎** | MEASURE 2 |  |