

Project Information	
Contractor name	Energy Trust ID #
Participant name	Participant project name (if different from participant name)
Installation address (street, suite, city, zip)	
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	
Inspection Results	
<input type="checkbox"/> Approved <input type="checkbox"/> Notice of a program violation(s)	
Requirements for approval:	
Review comments:	
Additional inspection required <input type="checkbox"/> Yes, planned inspection date (m/d/yy): <input type="checkbox"/> No	Contractor-paid inspection <input type="checkbox"/> Yes, fee: \$ <input type="checkbox"/> No
_____ Authorized program inspector (signature)	_____ Date
_____ Inspector name (print)	_____ Inspector phone number