In-Home Energy Services Temporary Equipment

Residential | Participation Application | Form 300IES-T

To be completed by Customer and IES Program Representative
///

Customer Authorization for Temporary Heating or Cooling Equipment

As part of Energy Trust's In-Home Energy Services (IES) Program, Energy Trust is offering temporary heating and cooling equipment to some customers who have been deemed eligible for IES Program home energy upgrades, do not currently have a functioning cooling and/or heating system, and are unable to maintain a safe and comfortable environment in their homes during extreme heat and cold events ("Customers"). This equipment is to be used temporarily between the time of installation and the time the IES Program HVAC upgrade is completed or (ii) the site is determined to not qualify for upgrades, and must be returned after its use.

Please understand that there is a waitlist to receive a unit and that submission of an application does not guarantee that Customer will be selected to receive equipment. Eligible applicants will be prioritized based on the following risk factors: over 60 years of age, have medical conditions that increase risk of heat or cold-related illness, and are living alone, or have children under the age of 10.

By signing this application below and completing this section, Customer certifies that the following responses are true and accurate:

Urgent Heating or Cooling Need *(completed by customer)*					
Please answer the following questions to help determine the need for temporary heating or cooling equipment.					
How many people reside in the home? ☐ Less than 1 ☐ 1- 2 ☐ 3- 5 ☐ 6- 9 ☐ 10+ ☐ Unsure					
Is anyone residing in the home over the age of 60? ☐ Yes ☐ No ☐ Unsure	Is anyone residing in the home under the age of 10?	☐ Yes	☐ No	☐ Unsure	
Does anyone residing in the home have a health condition that increases the risk of heat-related illness?		☐ Yes	☐ No	☐ Unsure	
Does anyone residing in the home have a health condition that increases risks in cold temperatures?		☐ Yes	☐ No	☐ Unsure	
Do any of the home's residents work from home or stay home for the majority of the day?		☐ Yes	☐ No	☐ Unsure	
Is there any other portable cooling equipment present in the home?	☐ Yes, please describe: ☐ No ☐ Unsure				
Is there any other portable heating equipment present in the home?	☐ Yes, please describe: ☐ No ☐ Unsure				
Energy Advisor Section (completed by energy advisor)					
Is extreme weather (above 90 or below 30) forecasted or likely before the expected IES Project installation date?			☐ Yes	☐ No	
Based on the questionnaire responses, does the resident qualify for no-cost incentives?			☐ Yes	☐ No	

By signing this application below, Customer acknowledges, agrees to, and authorizes the following:

- Customer will receive temporary heating and/or cooling equipment (the "Equipment").
- Customer has received and will follow the manufacturer's directions for the safe and effective installation, operation, and ultimate removal of Equipment.
  - Customer agrees to hold Energy Trust and CLEAResult free of any liability related to the Equipment and its installation and operation.
- Customer will return Equipment upon either successful installation of HVAC upgrades or determination that the site does not qualify for upgrades.
- Customer will be liable for any damage to the equipment beyond normal wear and tear.

In-Home Energy Services Temporary Equipment

Residential | Participation Application | Form 300IES-T

To be completed by Customer and IES Program Representative
//

Home Information *(completed by customer)*

Please answer the following questions to help us determine the correct equipment for your home. This information will also help develop future baselines and guidance for this initiative.

Where will the temporary equipment be placed?	☐ Bedroom	☐ Living Room	☐ Other, please describe:

Is your primary heating system currently functioning?	☐ Yes ☐ No	If no, how long has your primary heating system been non-functioning? *(in years)*	☐ I don't know ☐ Less than 1 year ☐ 1 – 2 years ☐ 3+ years

Does your household use sources other than your primary heating system for heat? *(select all that apply)*	☐ Gas fireplace ☐ Electric wall or space heater(s) ☐ Ductless/mini-split heat pump	☐ Wood stove/fireplace ☐ None ☐ Other, please describe:

How do you cool your home? *(select all that apply)*	☐ Central air conditioner ☐ Central heat pump ☐ Ductless/mini-split heat pump	☐ Fan(s) (ceiling/box/window) ☐ Portable or window air conditioner(s) ☐ Other, please describe:

Cooling Only: What style of window will this equipment be installed in? (*Note that sliding and double or single hung windows are simplest for installation.*)	☐ Sliding (Horizontal) ☐ Single Hung (Vertical) ☐ Awning (Vertical Swing)	☐ Casement (Horizontal Swing) ☐ Double Hung (Vertical, both halves move) ☐ Other, please describe:

Customer (Homeowner or Rental Property Owner/ Manager) Name and Signature

*By signing below, Customer (i) agrees to all of the terms and conditions on this form, (ii) acknowledges that this form is also subject to the terms and conditions previously agreed to in **Form 350IES: Customer Participation Agreement**, and (iii) represents that they are either the owner or property manager of the Site. If Customer is the property manager, they represent that they have the legal authority to enter into this agreement on behalf of the Site owner. Customer authorizes a Program representative or IES Program Representative to submit this authorization to Energy Trust on Customer's behalf.*

★ **Customer signature**   ★ **Full name** (please print and use same name as on invoice)   ★ **Date**

★ **Site Address**   ★ **City**   ★ **State**   ★ **Zip**

★ **Customer email address**   ★ **Customer phone**

IES Program Representative Name and Signature

By signing below, IES Representative certifies that this authorization, and any documentation are complete and accurate.

★ **IES Representative signature**   ★ **Full name** (please print)   ★ **Date**

Has temporary equipment been provided?	☐ Yes ☐ No	If so, is it heating or cooling equipment?	☐ Heating ☐ Cooling

Expected retrieval date: _____	Is any additional training or installation material needed? ☐ No ☐ Yes, please describe: