

Certificate of Completion - Audit & Direct Install

Section 1. Customer and Contractor Information

Customer Name	
Customer Building Address	
Customer Mailing Address	
Project ID	
Contractor Name	
WAP Coordination UWAP work complete	□ WAP work in-progress □ WAP will be completed within 12 months

Section 2. Customer Education: Energy Savings Action Plan

To reduce my monthly energy costs, I will take the following actions:				
Action 1				
Action 2				
Action 3				
Action 4				

If household opts out of Energy Education, have household initial here:

Section 3. Energy Saving Direct Install Measures

Measure Name	Installation Status >>	Yes	No	Measure Name	Installation Status >>	Yes	No
LEDs (standard or candelabra)				DHW Pressure Relief Va			
Advanced Power Strips				Furnace Filter*			
DHW Pipe Wrap Insulation				Furnace Filter Slot Cover			
Door Sweep				Showerheads (regular o			
Weatherstrip				Thermostat (programma	able)*		
CO Detector							
Smoke Detector							

Direct Install measures are provided at no cost to eligible customers.

Customers receiving electric service through a municipal electric provider may not be eligible for direct install measures.

*For renters, the installation of these measures require landlord permission through the submission of a Rental Property Energy Efficiency Service Agreement.

Section 4. Customer Statement and Signature

١,

attest that my home was left in good condition. I will make my

best effort to complete the energy savings action that I listed above. As part of the comprehensive home energy audit, the contractor installed the energy saving and/or direct install measures listed above unless I declined or there was no opportunity to install the specific measures.



Section 5. Building Leakage & Combustion Appliance Zone (CAZ) Testing

Blower Door Testing							
Test Out Date	/	/		Minimum Ve	ntilation Guideli	ne	CFM50
Inside Temperature			°F	Building Leal	kage		CFM50
Outside Temperature			°F	House Press	sure		Pa
Worst Case Depressurization			Pa	Fan Ring	🗌 Open	□ A □ B [C
				Fan Pressure	9		Pa
Combustion Appliance Zo	one (CAZ) Tes	ting					
Ambient CO (max in CAZ during test) PPM			Ambient CO (max in living space)			PPM	
Appliance Type	Electric	Combustion Appliance Testing					
Appliance Type	Testing NA	Spillage (We	orst Case)	Spillage (Natural)		CO (Worst Case)	(CO) Natural
Heating System 1		🗌 Pass	🗌 Fail	🗌 Pass	🗌 Fail	PPM	PPM
Heating System 2		🗌 Pass	🗌 Fail	🗌 Pass	🗌 Fail	PPM	PPM
Water Heater 1		Pass	🗌 Fail	🗌 Pass	🗌 Fail	PPM	PPM
Water Heater 2		Pass	🗌 Fail	🗌 Pass	🗌 Fail	PPM	PPM
Oven		🗌 Gas w/	no vent	🗌 Gas w/	vent	PPM	PPM
Note testing not completed and reasons why below. 🗌 No Blower Door Testing 🗌 No CAZ Testing							

Contractor: I,

attest that all measures installed through AHP

and/or EmPower adhere to current AHP/EmPower program guidelines. I further attest that, for all AHP/EmPower projects, I have conducted the appropriate Combustion Appliance Zone (CAZ) testing and left the home in a safe condition as per program requirements.

Technician Name (Print)

Technician SIGNATURE

Date