NEW YORK STATE OF OPPORTUNITY | NYSERDA

Final Project Submission & Payout

March 15, 2022

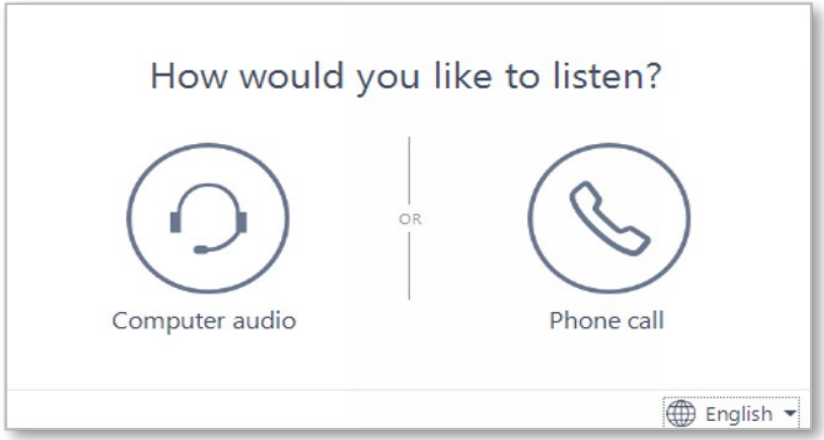
Participating Contractors

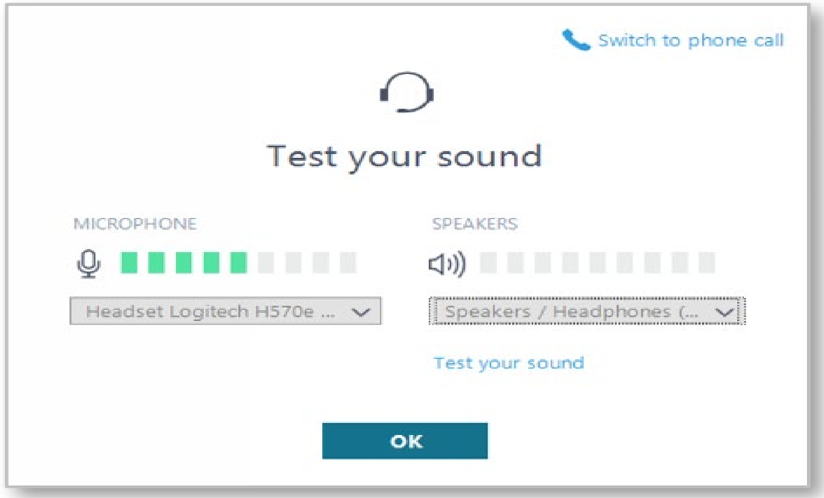
Audio Connection

To connect to audio:

1. Click the Computer audio icon to use this setting.

   To test your microphone, select the desired device from the drop down and look for the green bars. To test your sound, select the desired speaker, click “Test your sound”. Click Ok.





2. If you prefer to use a telephone, click the Phone call icon and dial in via the telephone number provided.

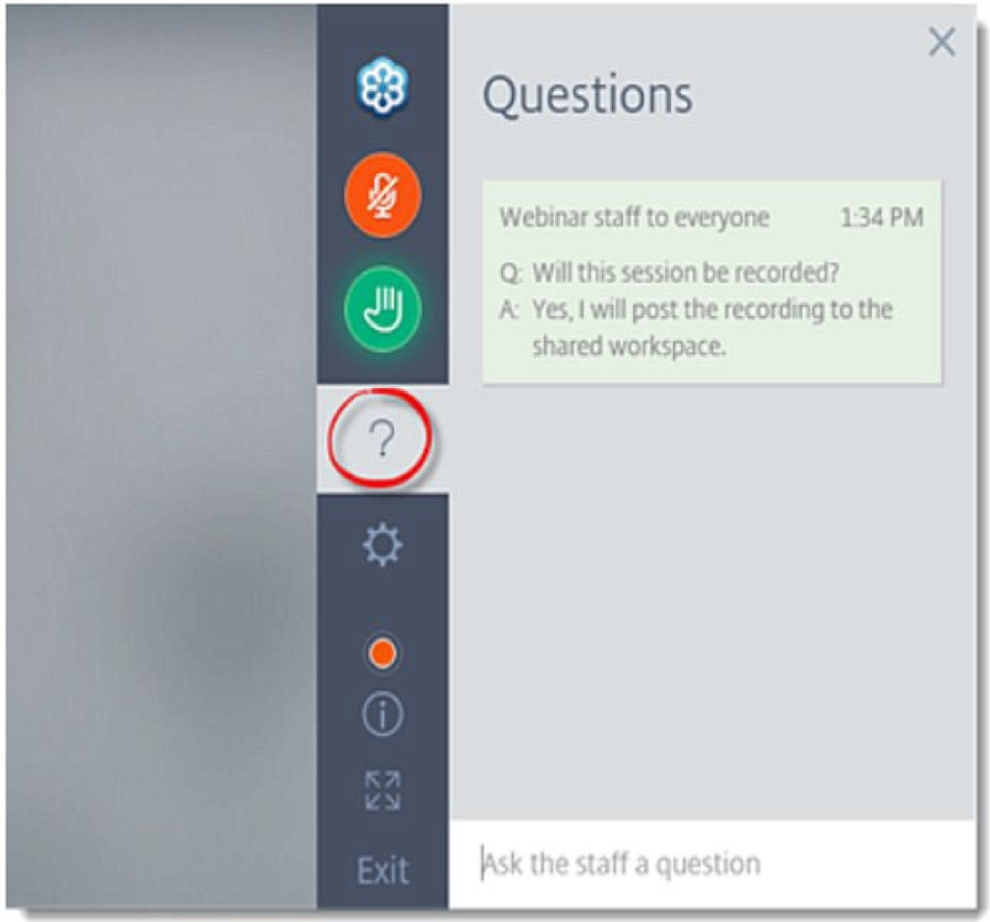
Questions

To ask a question:

1. Click the ? Icon in the toolbar.

2. Enter your question in the text field at the bottom, then press Enter on your keyboard.

When your question is answered, it will appear in the Questions pane. You will also see the Question icon display an indicator that there is an unread message waiting for you.



Training Schedule

1	**Introduction & Overview** FEB-22 | 3:00 PM – 4:30 PM	☑
2	**Combined Residential Application Process** FEB-24 | 3:00 PM – 4:00 PM	☑
3	**Audit & Direct Install** MAR-01 | 3:00 PM – 4:30 PM	☑
4	**Eligible Measures List & EmPCalc** MAR-08 | 3:00 PM – 4:30 PM	☑
5	**Workscope Submission** MAR-10 | 3:00 PM – 4:30 PM	☑
6	**Final Project Submission & Payout** MAR-15 | 3:00 PM – 4:30 PM	

Q&A Sessions and Office Hours will be held to support the associated trainings:

Q & A Sessions

~~MAR-04 8:30 AM – 9:30AM | Follow up to Trainings 1-3~~
MAR-17 3:00 PM – 4:00PM | Follow up to Trainings 4-6
MAR-24 3:00 PM – 4:00PM | Follow up to Trainings 1-6

Office Hours Sessions

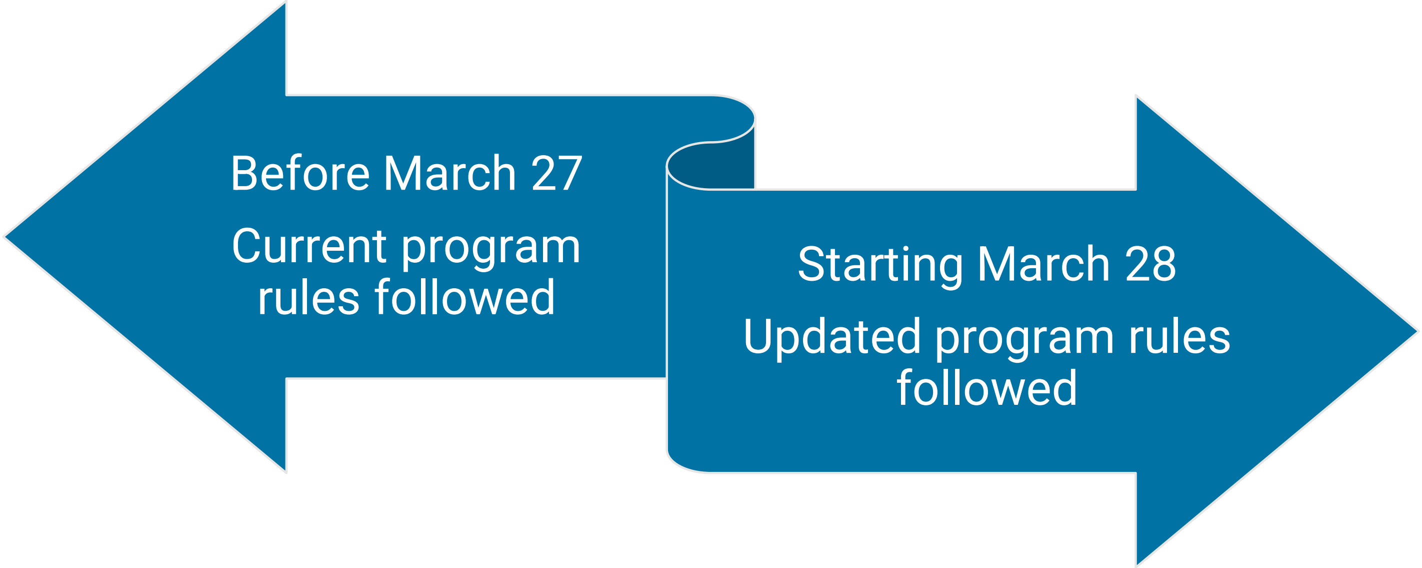
Session 1: APR-01 8:30 AM – 9:30AM
Session 2: APR-15 3:00 PM – 4:00PM
Session 3: APR-22 9:00 AM – 10:00AM

Start Date: Updated Program Changes

Combined Residential Application submission date determines how program rules are applied.

Online (Submission)

Paper (Postmark)

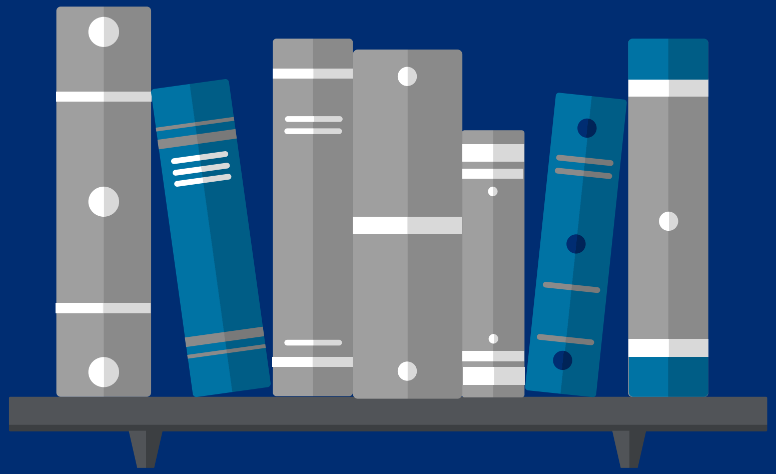


Objective

Review of documents and forms required for use in the Program.

Review the final submission of projects in the NY HP Portal for payout in both the EmPower and HPwES Express Contract workflows.

Final Project Submission & Payout



AGENDA

Impactful Program Updates

Training Schedule & Start Date

Program Documents & Forms

Tier 1–EmPower: Project Management & Completion

Tier 3–Assisted Home Performance: Project Management & Completion

Payment

Quality Assurance

Contractor Next Steps/Action Items

Q & A

Impactful Program Updates

Final Project Submission

Important information regarding changes to Final Project Submissions:

- Caps on fossil fuel equipment incentives
  Incentive caps: Tier 1-EmPower - $4,000 | Tier 3-Assisted Home Performance - $2,000. Including No Heat situations.
- Project level cost effectiveness
  Tier 1- EmPower and Tier 3-Assisted Home Performance will begin using project level cost effectiveness (total program incentives evaluated against the total savings of all measures).
- Updated program forms/documents
  Contractors will need to use updated forms after program updates are launched.

Program Documents & Forms

Program Documents & Forms

Required and As Needed Forms

Form	EmPower	AHP	Audit	Workscope Submission	Project Completion	Notes
Utility Bills or Usage Waiver, if bills are not available	■	■	x	x		Utility bills may be required if project shows extremely high savings or exceeds project limits.
Homeowner or Rental Property Agreement	■	■	x	x		
EmPCalc	■	■	x	x	x	
House Diagram	■	■	x	x		Diagram does not need to be on Program document.
Appliance Exchange Agreement	■	n/a	x	x		
Photos	■	■	x	x	as needed	
Certificate of Completion	■	■	x	x	x	
Contract	☐	■		x	x	Required when a customer contribution is required.
Subcontract	☐	☐		x	x	
HEAP Award Letters or Denials	☐	n/a		x		
OTDA Benefit Card	☐	n/a		x		Only when a CIN is needed on an OTDA ARPA funded project.
Heat Pump Informational Form	☐	☐		x	x	Waiver required for all heat pump projects.
AHRI Certificate/NEEP Cold Climate Spec Sheet	☐	☐		x		
NEC Calculation Worksheet	☐	☐		x	x	Required when proposing an upgrade to a panel box
Field Change Order Form	☐	☐		x	x	Required for all workscope changes after approval.
ProForma	☐	n/a		x		Case-by-case when Tier 1 customer is financing a heat pump.
State Historic Preservation Office Form	☐	☐		x		

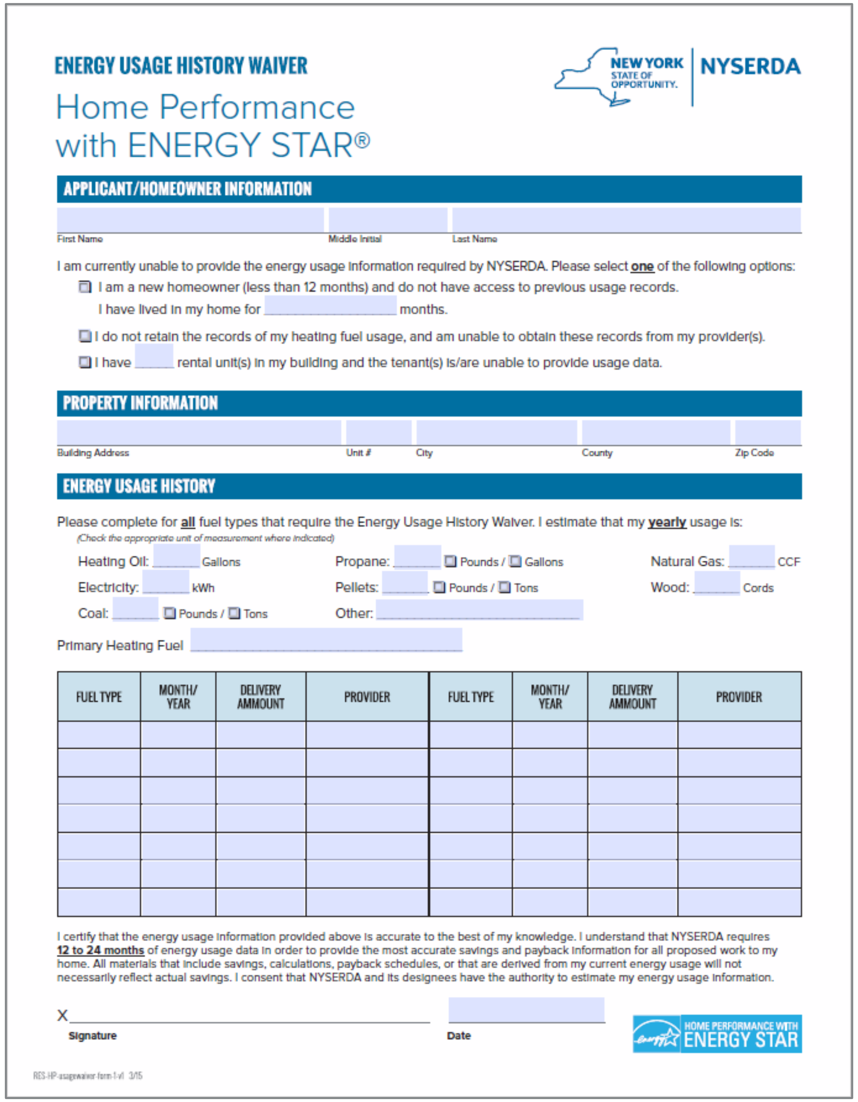
■ Required
☐ As Needed
n/a Not applicable

Utility Bills or Energy Usage Waiver, if bills not available

[CRM Section 3.5](#)

Utility bills should be collected and submitted to Program whenever possible. They will be required if projected savings are high or when exceptions to program rules are requested (i.e., exceeding program incentive caps).

- All utilities provide online access to their customers or will mail historical usage to their customers.
- Most fuel delivery businesses provide historical data upon request from a customer.
- Intent of Energy Usage Waiver Form:
  - New homeowners (less than 12 months) that do not have access to previous usage records. Estimate annual usage.
  - No records were retained, and homeowner attempted but was unable to obtain them. (i.e., ad hoc fuel deliveries)
  - Landlord was unable to obtain usage data from tenants.



ENERGY USAGE HISTORY WAIVER

Home Performance with ENERGY STAR®

NEW YORK STATE OF OPPORTUNITY. | NYSERDA

APPLICANT/HOMEOWNER INFORMATION

First Name | Middle Initial | Last Name

I am currently unable to provide the energy usage information required by NYSERDA. Please select **one** of the following options:

- ☐ I am a new homeowner (less than 12 months) and do not have access to previous usage records. I have lived in my home for ________ months.
- ☐ I do not retain the records of my heating fuel usage, and am unable to obtain these records from my provider(s).
- ☐ I have ____ rental unit(s) in my building and the tenant(s) is/are unable to provide usage data.

PROPERTY INFORMATION

Building Address | Unit # | City | County | Zip Code

ENERGY USAGE HISTORY

Please complete for **all** fuel types that require the Energy Usage History Waiver. I estimate that my **yearly** usage is:

(Check the appropriate unit of measurement where indicated)

Heating Oil: ____ Gallons
Propane: ____ ☐ Pounds / ☐ Gallons
Natural Gas: ____ CCF
Electricity: ____ kWh
Pellets: ____ ☐ Pounds / ☐ Tons
Wood: ____ Cords
Coal: ____ ☐ Pounds / ☐ Tons
Other: ________

Primary Heating Fuel ________

FUEL TYPE	MONTH/ YEAR	DELIVERY AMMOUNT	PROVIDER	FUEL TYPE	MONTH/ YEAR	DELIVERY AMMOUNT	PROVIDER

I certify that the energy usage information provided above is accurate to the best of my knowledge. I understand that NYSERDA requires **12 to 24 months** of energy usage data in order to provide the most accurate savings and payback information for all proposed work to my home. All materials that include savings, calculations, payback schedules, or that are derived from my current energy usage will not necessarily reflect actual savings. I consent that NYSERDA and its designees have the authority to estimate my energy usage information.

X________________ Signature

Date

HOME PERFORMANCE WITH ENERGY STAR

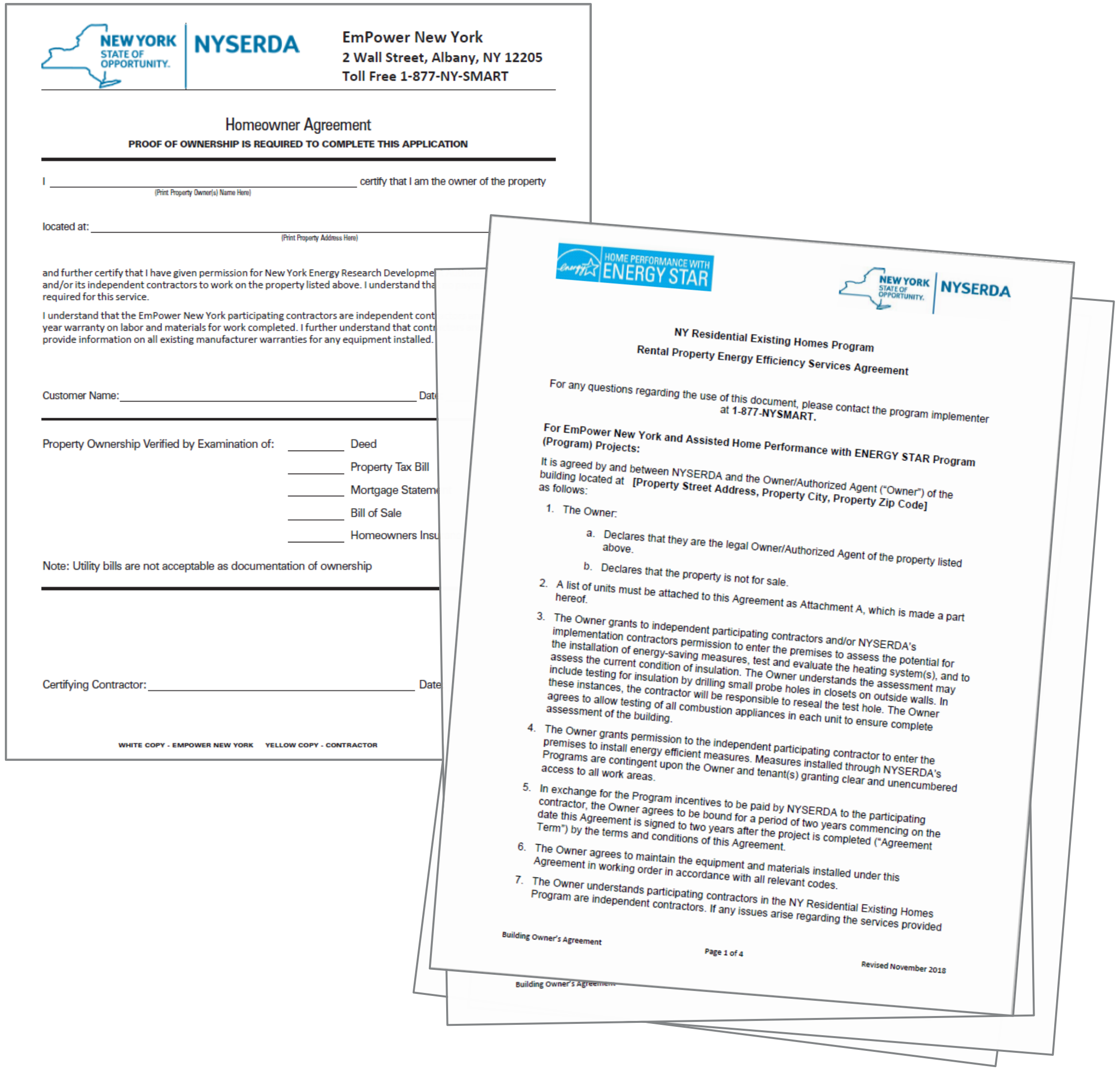
RES-HP-usagewaiver-form-1-v1 3/15

Homeowner or Rental Property Agreement

CRM Section 3.10 | Section 3.7

These agreements declare ownership of the property and allow participating contractors in EmPower and Assisted Home Performance to work on the property.

- Signed agreements are required before any measures, other than basic Direct Install ones, can be approved by the Program.


NEW YORK STATE OF OPPORTUNITY. NYSERDA

EmPower New York
2 Wall Street, Albany, NY 12205
Toll Free 1-877-NY-SMART

Homeowner Agreement

PROOF OF OWNERSHIP IS REQUIRED TO COMPLETE THIS APPLICATION

I ______________________ (Print Property Owner(s) Name Here) certify that I am the owner of the property

located at: ______________________ (Print Property Address Here)

and further certify that I have given permission for New York Energy Research Developme
and/or its independent contractors to work on the property listed above. I understand tha
required for this service.

I understand that the EmPower New York participating contractors are independent cont
year warranty on labor and materials for work completed. I further understand that contr
provide information on all existing manufacturer warranties for any equipment installed.

Customer Name: ______________________ Dat

Property Ownership Verified by Examination of:
____ Deed
____ Property Tax Bill
____ Mortgage Statem
____ Bill of Sale
____ Homeowners Insu

Note: Utility bills are not acceptable as documentation of ownership

Certifying Contractor: ______________________ Date

WHITE COPY - EMPOWER NEW YORK YELLOW COPY - CONTRACTOR

HOME PERFORMANCE WITH ENERGY STAR

NEW YORK STATE OF OPPORTUNITY. NYSERDA

NY Residential Existing Homes Program

Rental Property Energy Efficiency Services Agreement

For any questions regarding the use of this document, please contact the program implementer at 1-877-NYSMART.

For EmPower New York and Assisted Home Performance with ENERGY STAR Program (Program) Projects:

It is agreed by and between NYSERDA and the Owner/Authorized Agent ("Owner") of the building located at [Property Street Address, Property City, Property Zip Code] as follows:

1. The Owner:
   a. Declares that they are the legal Owner/Authorized Agent of the property listed above.
   b. Declares that the property is not for sale.
2. A list of units must be attached to this Agreement as Attachment A, which is made a part hereof.
3. The Owner grants to independent participating contractors and/or NYSERDA's implementation contractors permission to enter the premises to assess the potential for the installation of energy-saving measures, test and evaluate the heating system(s), and to assess the current condition of insulation. The Owner understands the assessment may include testing for insulation by drilling small probe holes in closets on outside walls. In these instances, the contractor will be responsible to reseal the test hole. The Owner agrees to allow testing of all combustion appliances in each unit to ensure complete assessment of the building.
4. The Owner grants permission to the independent participating contractor to enter the premises to install energy efficient measures. Measures installed through NYSERDA's Programs are contingent upon the Owner and tenant(s) granting clear and unencumbered access to all work areas.
5. In exchange for the Program incentives to be paid by NYSERDA to the participating contractor, the Owner agrees to be bound for a period of two years commencing on the date this Agreement is signed to two years after the project is completed ("Agreement Term") by the terms and conditions of this Agreement.
6. The Owner agrees to maintain the equipment and materials installed under this Agreement in working order in accordance with all relevant codes.
7. The Owner understands participating contractors in the NY Residential Existing Homes Program are independent contractors. If any issues arise regarding the services provided

Building Owner's Agreement Page 1 of 4 Revised November 2018

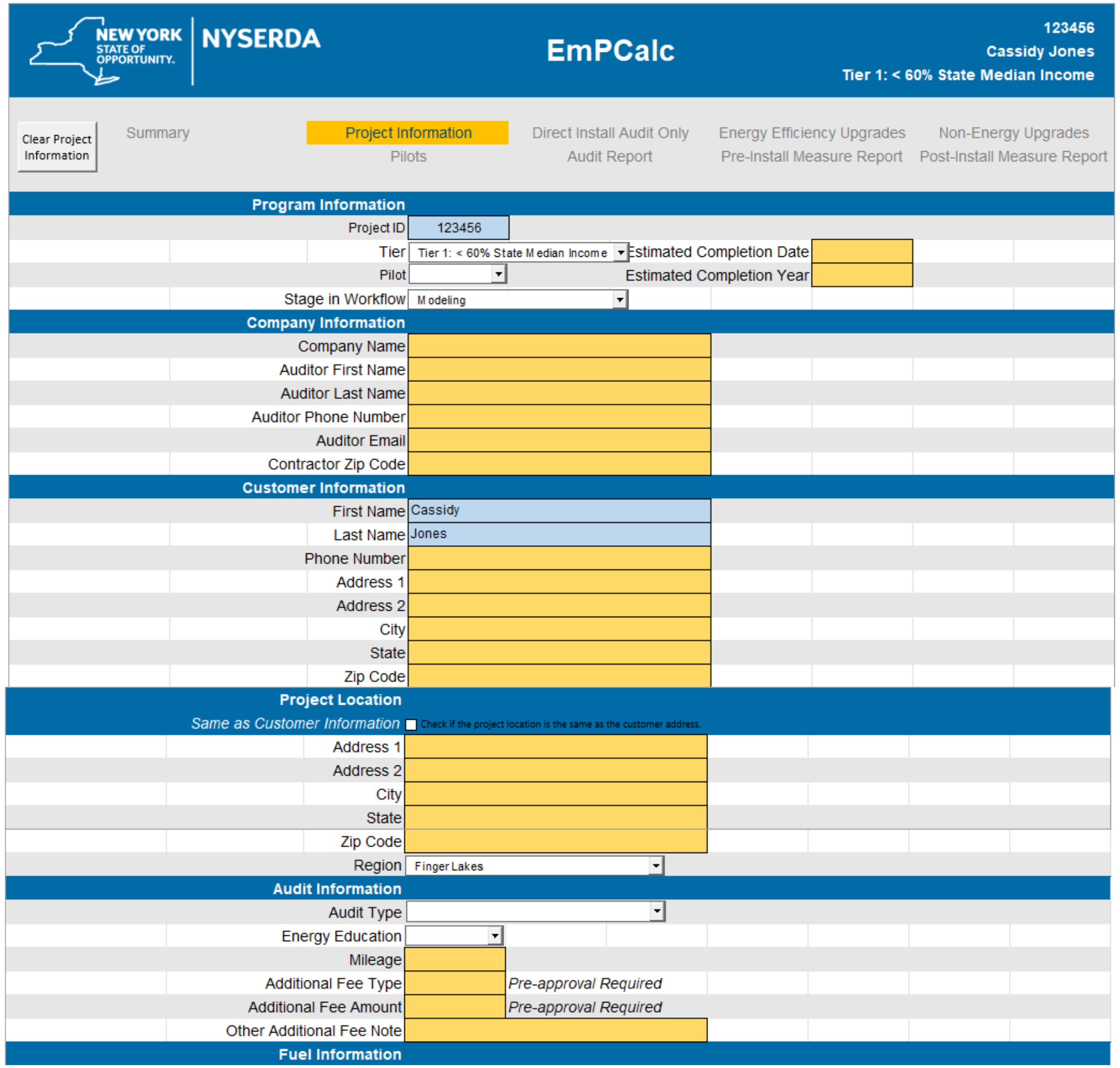
Program Documents & Forms

EmPCalc

[CRM Section 11.2c](#)

Program approved tool used to collect project information, calculate proposed energy efficiency measures and estimate project incentives.

- Always utilize the latest version, a link is available on the [Contractor Support home page](#).
  - Only the newly redesigned version can be used for projects using the updated program rules on/after March 28.
- Use for all NY HP Portal workflows (EmPower, HPwES Express Audit, HPwES Express Contract)
- Use the same version of EmPCalc for a project's life cycle unless otherwise directed by Program.
- At a project's final submission ensure that all updates made in EmPCalc align with the approved workscope.

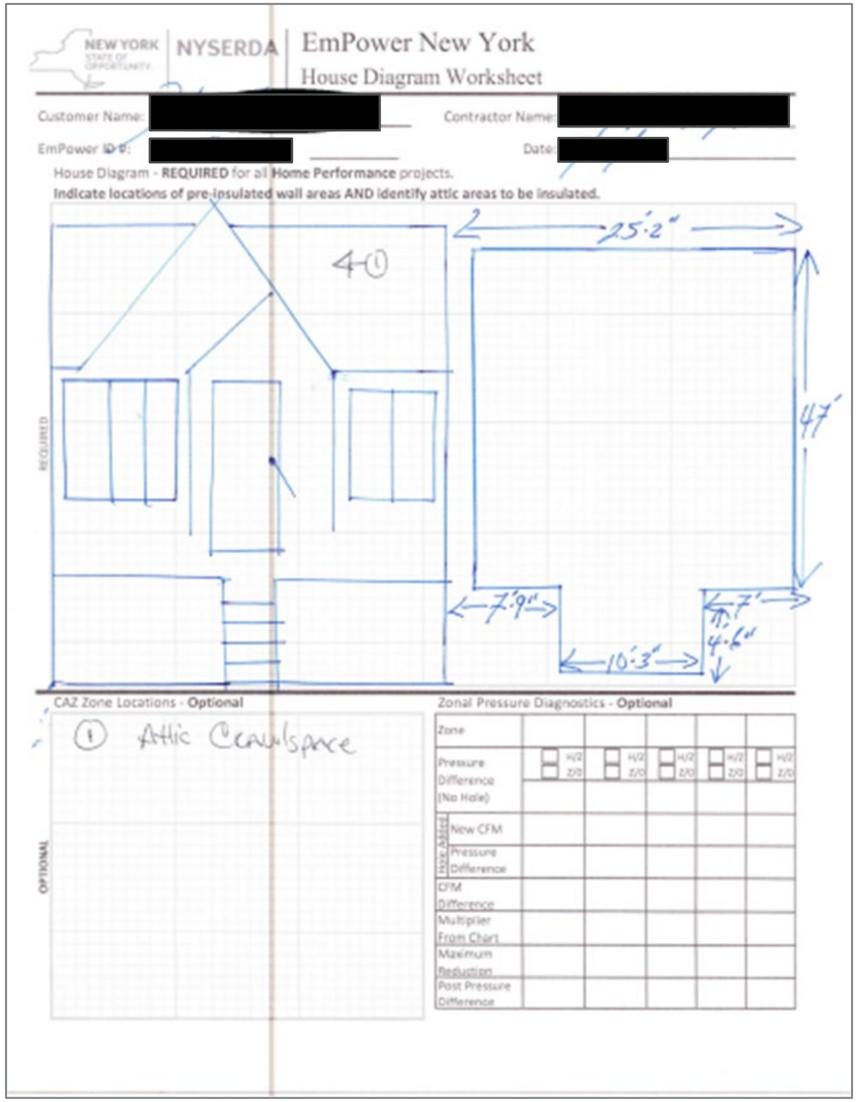


House Diagram Worksheet

[CRM Section 8.2h](#)

Sketch of a dwelling’s relevant exterior features and interior layout to aid in workscope development and review.

- Required for both EmPower and Assisted Home Performance.
- Diagram does not need to be on Program document but must be legible and include dimensions of all insulated surfaces.


NEW YORK STATE OF OPPORTUNITY | NYSERDA | EmPower New York

House Diagram Worksheet

Customer Name: [redacted] Contractor Name: [redacted]

EmPower ID #: [redacted] Date: [redacted]

House Diagram - **REQUIRED** for all **Home Performance** projects.

Indicate locations of pre-insulated wall areas AND identify attic areas to be insulated.

REQUIRED

40

25'2"

47'

7'9"

7'

4'6"

10'3"

CAZ Zone Locations - **Optional**

OPTIONAL

① Attic Crawlspace

Zonal Pressure Diagnostics - **Optional**

Zone					
Pressure Difference (No Hole)	H/Z Z/O	H/Z Z/O	H/Z Z/O	H/Z Z/O	H/Z Z/O
Hole Added: New CFM					
Hole Added: Pressure Difference					
CFM Difference					
Multiplier From Chart					
Maximum Reduction					
Post Pressure Difference					

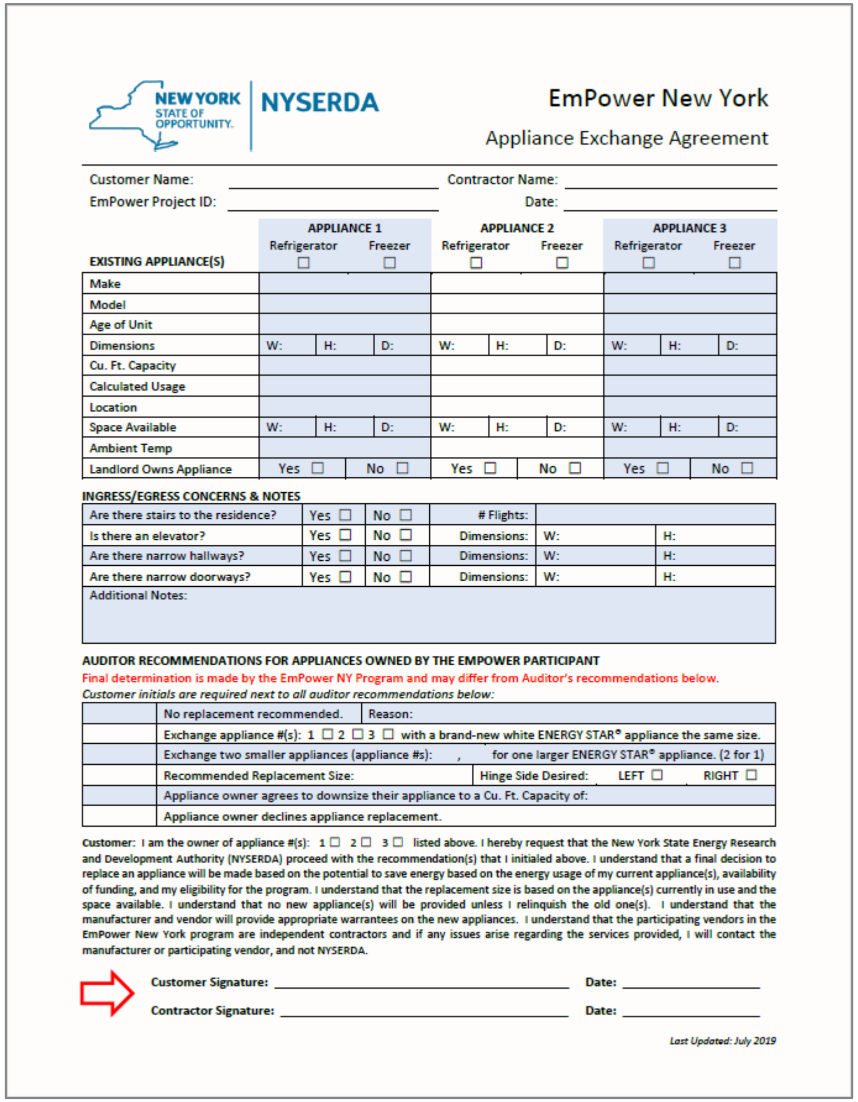
Program Documents & Forms

Appliance Exchange Agreement

CRM Section 8.2e

Data collection of all existing refrigerator(s) and freezer(s) to determine replacement need.

- Required for EmPower only.
- Accurately measure and record all appliance dimensions and the space they occupy so that return visits are not needed.
- Provide ingress/egress information and notes for delivery.
- Customers must initial all recommendations.
- Both Customer and Contractor signatures required.



NEW YORK STATE OF OPPORTUNITY. | NYSERDA

EmPower New York

Appliance Exchange Agreement

Customer Name: ____________ Contractor Name: ____________

EmPower Project ID: ____________ Date: ____________

EXISTING APPLIANCE(S)	APPLIANCE 1 Refrigerator ☐	Freezer ☐		APPLIANCE 2 Refrigerator ☐	Freezer ☐		APPLIANCE 3 Refrigerator ☐	Freezer ☐	
Make									
Model									
Age of Unit									
Dimensions	W:	H:	D:	W:	H:	D:	W:	H:	D:
Cu. Ft. Capacity									
Calculated Usage									
Location									
Space Available	W:	H:	D:	W:	H:	D:	W:	H:	D:
Ambient Temp									
Landlord Owns Appliance	Yes ☐	No ☐		Yes ☐	No ☐		Yes ☐	No ☐	

INGRESS/EGRESS CONCERNS & NOTES

Are there stairs to the residence?	Yes ☐	No ☐	# Flights:		
Is there an elevator?	Yes ☐	No ☐	Dimensions:	W:	H:
Are there narrow hallways?	Yes ☐	No ☐	Dimensions:	W:	H:
Are there narrow doorways?	Yes ☐	No ☐	Dimensions:	W:	H:
Additional Notes:					

AUDITOR RECOMMENDATIONS FOR APPLIANCES OWNED BY THE EMPOWER PARTICIPANT

Final determination is made by the EmPower NY Program and may differ from Auditor's recommendations below.

Customer initials are required next to all auditor recommendations below:

	No replacement recommended.	Reason:
	Exchange appliance #(s): 1 ☐ 2 ☐ 3 ☐ with a brand-new white ENERGY STAR® appliance the same size.	
	Exchange two smaller appliances (appliance #s): , for one larger ENERGY STAR® appliance. (2 for 1)	
	Recommended Replacement Size:	Hinge Side Desired: LEFT ☐ RIGHT ☐
	Appliance owner agrees to downsize their appliance to a Cu. Ft. Capacity of:	
	Appliance owner declines appliance replacement.	

Customer: I am the owner of appliance #(s): 1 ☐ 2 ☐ 3 ☐ listed above. I hereby request that the New York State Energy Research and Development Authority (NYSERDA) proceed with the recommendation(s) that I initialed above. I understand that a final decision to replace an appliance will be made based on the potential to save energy based on the energy usage of my current appliance(s), availability of funding, and my eligibility for the program. I understand that the replacement size is based on the appliance(s) currently in use and the space available. I understand that no new appliance(s) will be provided unless I relinquish the old one(s). I understand that the manufacturer and vendor will provide appropriate warrantees on the new appliances. I understand that the participating vendors in the EmPower New York program are independent contractors and if any issues arise regarding the services provided, I will contact the manufacturer or participating vendor, and not NYSERDA.

Customer Signature: ____________ **Date:** ____________

Contractor Signature: ____________ **Date:** ____________

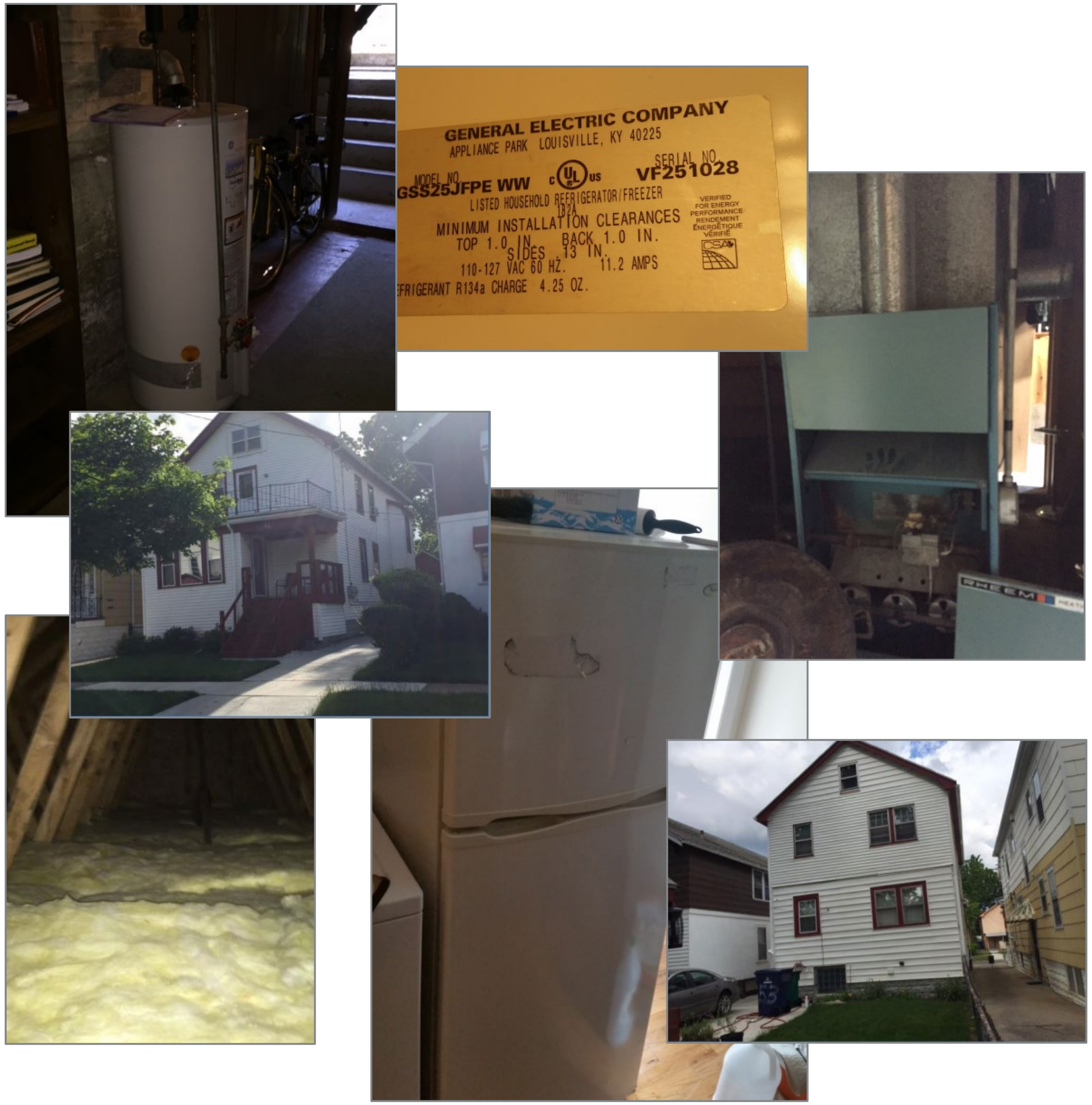
Last Updated: July 2019

Photos

Pictures are required for all projects. Requested that pictures are submitted as one file rather than individually. This will speed the review process.

Required photos for EmPower and Assisted Home Performance:

- All exterior sides of dwelling
- Refrigerator(s)
- Freezer(s) (if present)
- HVAC (Heating and Cooling Systems, Water Heater)
- Pre-existing attic insulation levels
- Other targeted measure(s) for replacement
- Exception requests



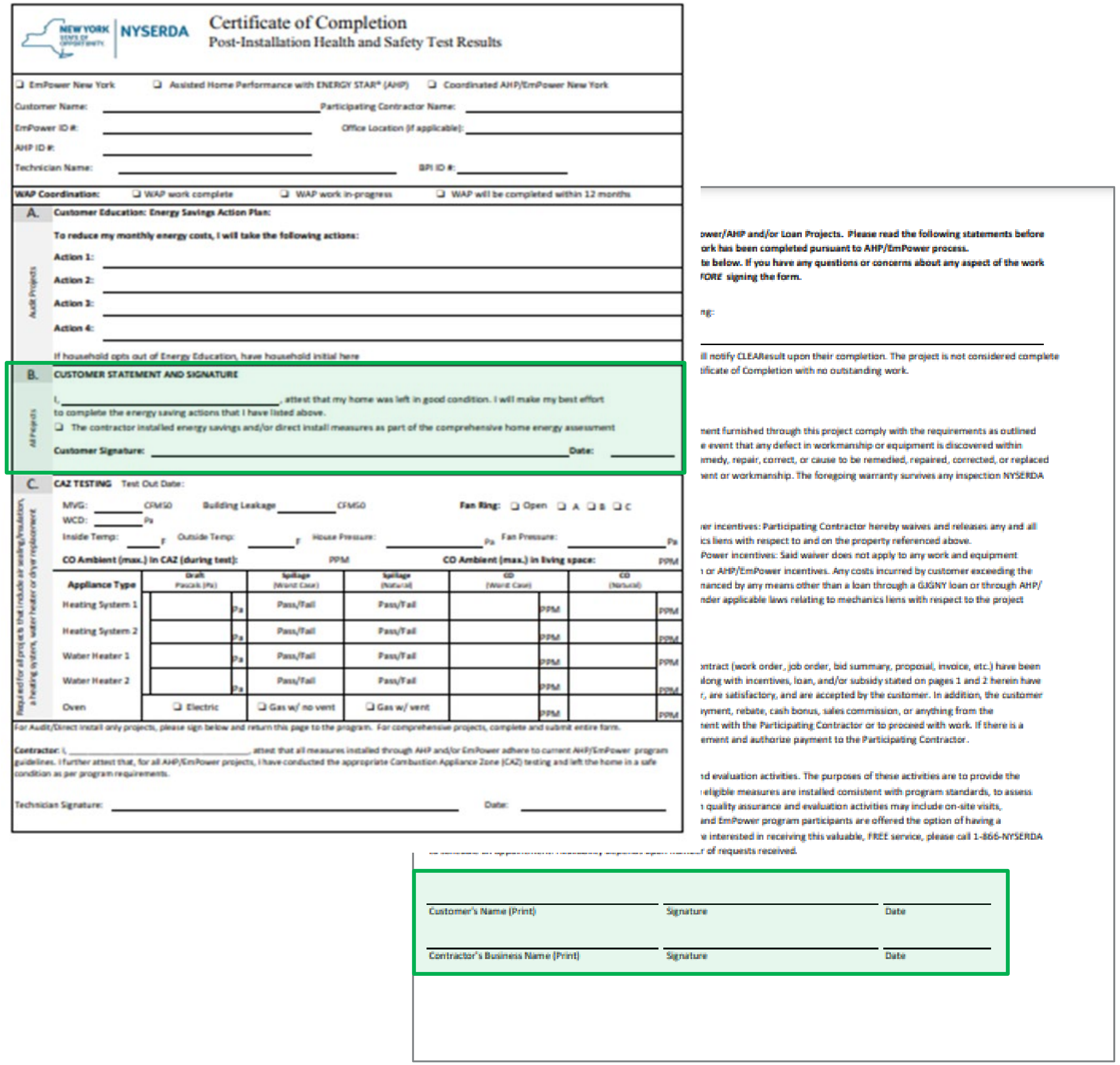
Program Documents & Forms

Certificate of Completion

CRM Section 8.1e and 8.2c

Customer sign-off attesting that the dwelling was left in good condition and if Direct Install and/or energy saving measures were installed.

- Two pages with two signature areas for both customer and contractor.
  - Page 1: Can be signed and dated at time of audit or at time of test-out.
  - Page 2: Must be signed and dated at time of test-out.
- All combustion testing information must be completed by technician.



Contract & Subcontracts

CRM Section 13.2

Contract

- Must follow NY contract law.
- Must be on company letterhead.
- Must be signed by both customer and contractor.
- Itemize workscope with information pertaining to installed measures, how the items were installed, and the total cost for each item.

Subcontracts

- Must be uploaded if a subcontractor is used.
- Subcontracts must be between contractor and subcontractor, not between customer and subcontractor.

Sample Contract/Work scope

HOME IMPROVEMENT COMPANY

ADDRESS

CONTRACT

Homeowner's
Name_________________________________Date_______________
Address____
Job Location____
City, State, Zip Code ____
Home Phone #_________________________Cell Phone #_________________
Home Performance Contractor's Representative Name
____

Approximate Project Start Date_______________________
Approximate Project Completion Date_______________________
Does the project need to be completed by a certain date? Yes___ No___

DESCRIPTION OF LABOR/MATERIALS & PRICES (subtotals preferred)

Insulation (specify surface type, approximate sq ft, material, depth, and scope of work)

Insulate 800 sq ft of attic floor
$COST
Blow cellulose, 12" loose fill on top of existing 3" fiberglass (R-50)
Baffle as needed to keep insulation out of soffit vents and deter windwash
Includes building foam board retaining wall around attic hatch
Includes weather stripping and attaching 2" foam board to attic hatch
Installation of 3 roof vents

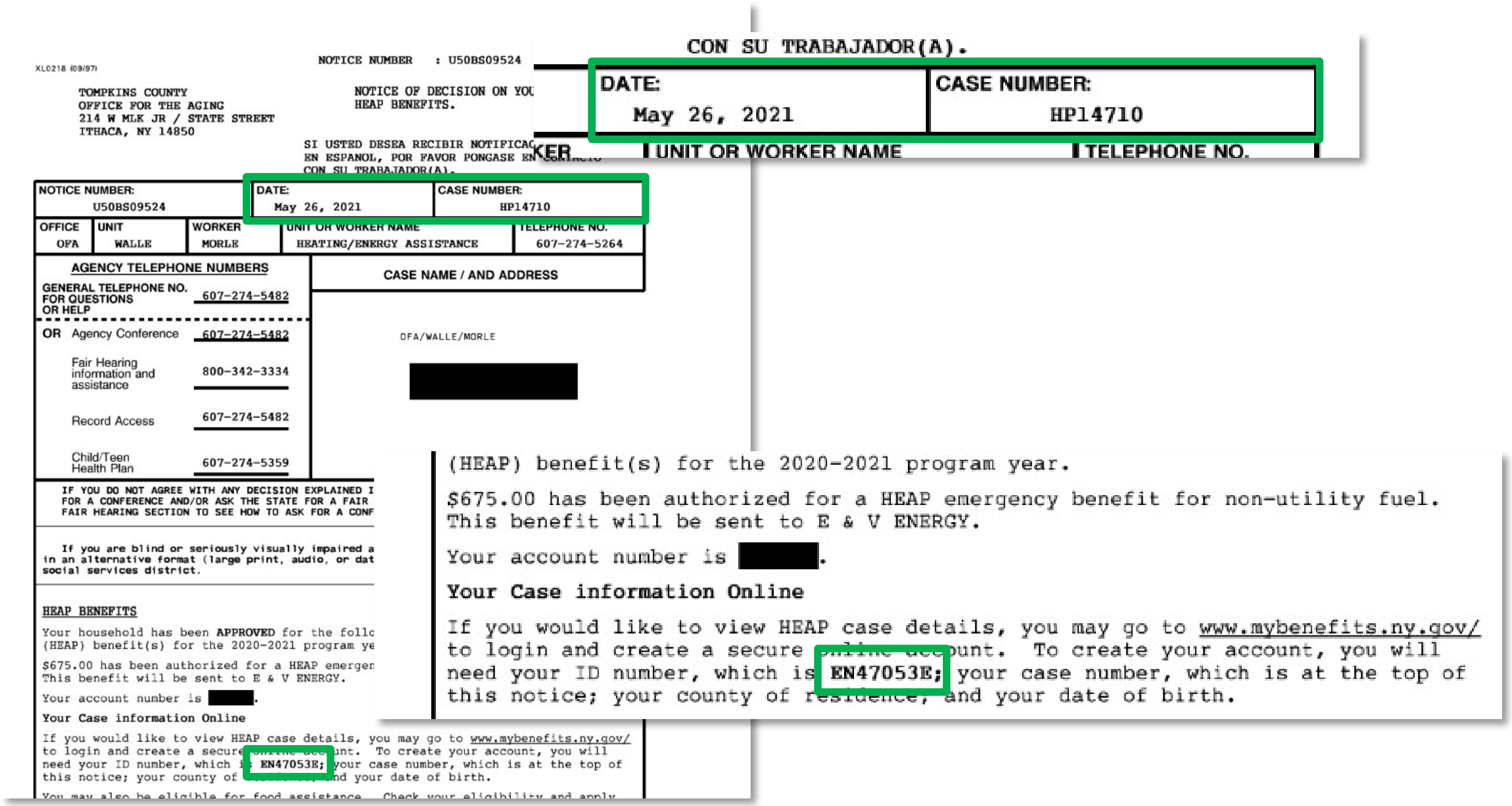
Insulate 200 sq ft of floor behind the knee wall
$COST
Drill holes into attic floor to access uninsulated floor cavities
Blow 6" dense packed cellulose (R-19) into all accessible cavities of the attic floor
Use wooden plugs to patch drilled holes

Insulate 1000 sq ft of exterior sidewalls
$COST

Sec. 13.2 Page 2 of 6 September 2016

HEAP Benefit Award Letters, including the CIN (OTDA Benefit Card)

Increased funding may be available to serve HEAP recipients with envelope and heat pump measures. Award letters must be dated October 1, 2021, or later and include the CIN (Customer Information Number) or Case Number. The CIN is usually located in the Case Information area.



XL0218 (09/97)

NOTICE NUMBER : U50BS09524

TOMPKINS COUNTY
OFFICE FOR THE AGING
214 W MLK JR / STATE STREET
ITHACA, NY 14850

NOTICE OF DECISION ON YOU
HEAP BENEFITS.

SI USTED DESEA RECIBIR NOTIFICAC
EN ESPANOL, POR FAVOR PONGASE EN
CON SU TRABAJADOR(A).

NOTICE NUMBER:		DATE:	CASE NUMBER:
U50BS09524		May 26, 2021	HP14710

OFFICE	UNIT	WORKER	UNIT OR WORKER NAME	TELEPHONE NO.
OFA	WALLE	MORLE	HEATING/ENERGY ASSISTANCE	607-274-5264

AGENCY TELEPHONE NUMBERS

GENERAL TELEPHONE NO. FOR QUESTIONS OR HELP	607-274-5482
OR Agency Conference	607-274-5482
Fair Hearing information and assistance	800-342-3334
Record Access	607-274-5482
Child/Teen Health Plan	607-274-5359

CASE NAME / AND ADDRESS

OFA/WALLE/MORLE

[redacted]

IF YOU DO NOT AGREE WITH ANY DECISION EXPLAINED I
FOR A CONFERENCE AND/OR ASK THE STATE FOR A FAIR
FAIR HEARING SECTION TO SEE HOW TO ASK FOR A CONF

If you are blind or seriously visually impaired a
in an alternative format (large print, audio, or dat
social services district.

HEAP BENEFITS

Your household has been APPROVED for the follo
(HEAP) benefit(s) for the 2020-2021 program ye
$675.00 has been authorized for a HEAP emergen
This benefit will be sent to E & V ENERGY.

Your account number is [redacted].

Your Case information Online

If you would like to view HEAP case details, you may go to www.mybenefits.ny.gov/ to login and create a secure online account. To create your account, you will need your ID number, which is EN47053E; your case number, which is at the top of this notice; your county of residence, and your date of birth.

You may also be eligible for food assistance. Check your eligibility and apply

CON SU TRABAJADOR(A).

DATE:	CASE NUMBER:
May 26, 2021	HP14710

UNIT OR WORKER NAME | TELEPHONE NO.

(HEAP) benefit(s) for the 2020-2021 program year.

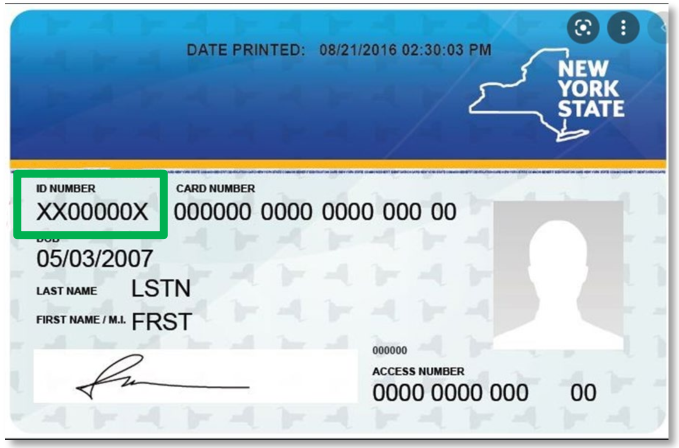
$675.00 has been authorized for a HEAP emergency benefit for non-utility fuel. This benefit will be sent to E & V ENERGY.

Your account number is [redacted].

Your Case information Online

If you would like to view HEAP case details, you may go to www.mybenefits.ny.gov/ to login and create a secure online account. To create your account, you will need your ID number, which is EN47053E; your case number, which is at the top of this notice; your county of residence, and your date of birth.

If the award letter does not have a CIN number submit a copy of the customer's benefit card with the award letter. The benefit card has the CIN number labeled ID number.



Program Documents & Forms

Heat Pump Informational Form*

CRM Section 5.6

Customer sign-off acknowledging potential drawbacks of a heat pump installation.

- Submission required with workscope for all heat pump installations.
- Needed for both Tier 1 and Tier 3 customers.
- Signatures required from Customer and Contractor.

** Updated version to be released soon with additional attestations about potential energy increases depending on the measures proposed.*

NEW YORK STATE OF OPPORTUNITY. | NYSERDA

Heat Pump Informational Form

I,__________________________residing at __________________________ acknowledge the following in regard to the installation of a heat pump system in my home:

1. Installing a heat pump in a home that does not have air conditioning can result in higher electric bills when used for air conditioning.
2. If I receive bill payment assistance through my utility or the Home Energy Assistance Program (HEAP), the shift in primary heating fuel source from a fossil fuel to electric may impact the level of bill payment assistance received. I will notify my utility and county Department of Social Services that I have installed a heat pump and have changed my primary fuel to electricity.
3. Overall energy cost reductions are not guaranteed, and my bills may increase. Energy costs depend on a variety of factors, including usage and how well my home is insulated and air sealed.
4. Heat pumps operate differently from traditional boilers and forced air furnaces. In order to maintain comfort in my home I may have to learn how to operate my thermostat differently. I understand that my HVAC contractor will instruct me in the proper use of the heat pump and its thermostat.

__________________________ __________
Homeowner (Printed) Date

__________________________ __________
Homeowner (Signature) Date

__________________________ __________
Contractor (Signature) Date

V2-2.23.2021

AHRI Certificate / NEEP Cold Climate Spec Sheet

https://www.ahridirectory.org/ / https://ashp.neep.org/#!/

AHRI Certificate

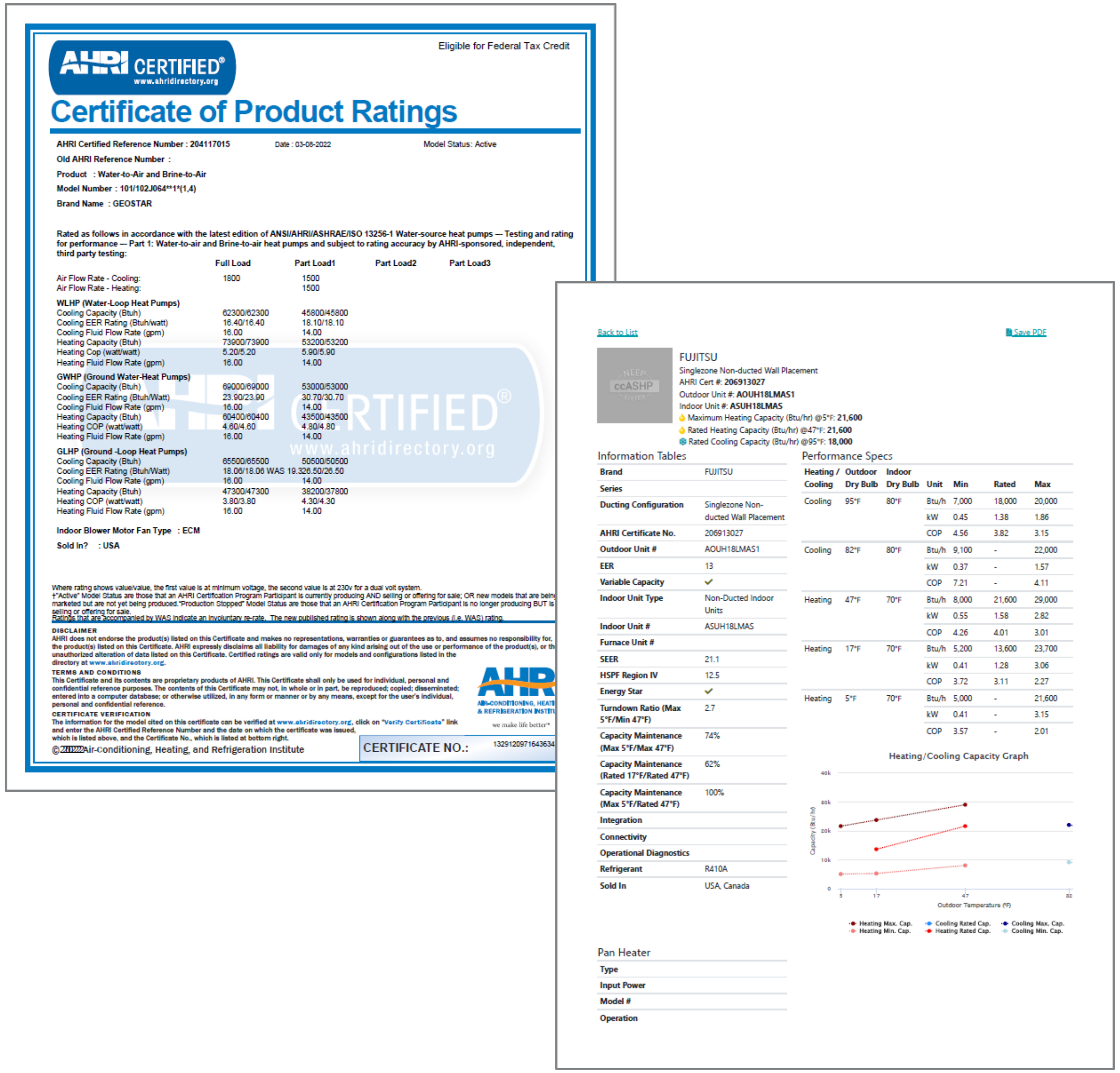
Online directory of HVACR equipment and certified performance ratings.

- Submission required for specific Brand/Model being installed on project:
    - Ground Source Heat Pumps, Furnaces, Boilers, Water Heaters

NEEP Cold Climate Spec Sheet

List of ASHP systems that meet the latest version of the ccASHP Specification. The voluntary specification includes requirements for both performance levels and a series of reported performance standards.

- Submission required with workscope for all ASHP installations.
- EmPCalc inputs can be found on spec sheet.



Program Documents & Forms

NEC (National Electrical Code) Calculation Worksheet

[CRM Section 5.6]

Worksheet to calculate the electrical load for single family dwellings.

- Submission required with workscope for all electric panel upgrades.

NEC Standard Electrical Load Calculation for Single Family Dwellings

(Only for Service Ratings of 120/240V, 225 Amps Max)

Owner:________________________ Location:________________________

Total Floor Area of Dwelling (NEC 220.12)____________________SQFT.

Factor	**Quantity**	**Volt Amperes (VA)**
"General Lighting"		
1. General Lighting (SQFT X 3 VA/SQ FT (Table 220.12)	3 X sqft	
2. Small Appliance Circuits (1500 VA per circuit) (NEC 220.52(A)) (minimum 2)	1500 X	
3. Laundry Circuit (1500 VA per circuit) (NEC 220.52(B))	1500 X	
4. Total General Lighting Load (Add lines 1, 2 & 3):		
5. First 3000 VA @ 100%:		3000
6. Total General Lighting Load – 3000 =__________@ 35%=		
7. Net General Lighting Load (Per NEC 220.42) **(Add lines 5 & 6):**		

***Fixed Appliances(if insufficient space, use back):**	YES	NO	
• Garbage Disposal			
• Bathroom Fan			
• Microwave			
• Dishwasher			
• Other:			
• Other:			
		Total	
8. 3 or less Appliances, Total Appliance VA; 4 or more Appliances, 75% of Total Appliance VA (NEC 220.53):			

***Other Loads (including motors, EV charger(s), etc.)**	YES	NO	Nameplate Rating (VA)
9. Electric Range (8000VA or Nameplate)**			
10. HVAC			
11. Electric Oven			
12. Electric Dryer (5000 VA minimum)**			
13. Electric Vehicle Charger	✔		
14. Other:			
15. Other:			
16. 25% of largest motor (NEC 430.24)			

Total Service Load Volt-Amperes (VA) (Add lines 7, 8 & 9 thru 16) =

Total Service Load Volt-Amperes / 240-volts = Amperes

*****Service Rating (Amperes)=**

* For every "YES" answer, indicate VA rating of equipment

** Nameplate rating must be used if larger

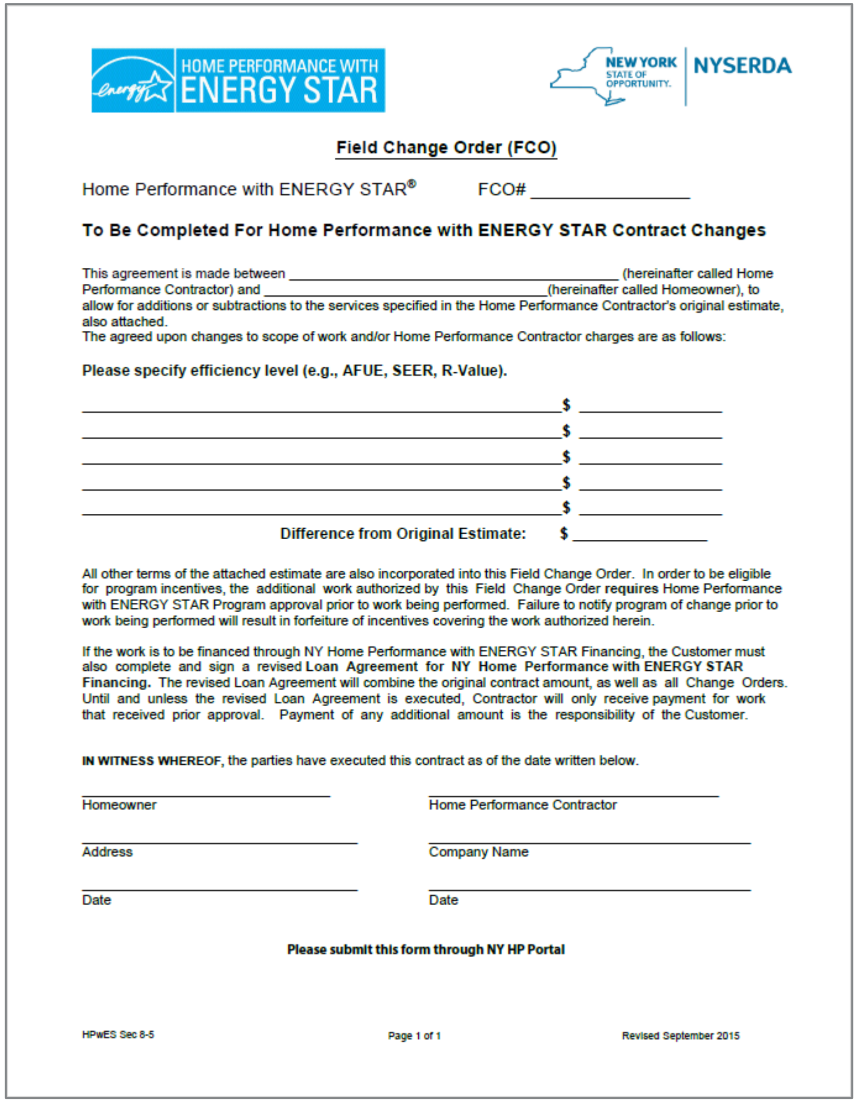
*** Service Rating shall be greater than or equal to the Service load

Field Change Order (FCO)

CRM Section 8.1d

Agreement between customer and contractor of changes to the previously agreed upon workscope. Required on projects with any changes to the approval provided by the Program implementer in the NY HP Portal.

- Must be signed by both the customer and contractor.
- Workscope changes $500 or under do not require pre-approval. These changes can be submitted at the time of final submission.
- The measure that was not present in the original approval should listed or if installed equipment was changed, that should be delineated.



HOME PERFORMANCE WITH ENERGY STAR

NEW YORK STATE OF OPPORTUNITY. | NYSERDA

Field Change Order (FCO)

Home Performance with ENERGY STAR® FCO# ______________

To Be Completed For Home Performance with ENERGY STAR Contract Changes

This agreement is made between ______________________________ (hereinafter called Home Performance Contractor) and ______________________________ (hereinafter called Homeowner), to allow for additions or subtractions to the services specified in the Home Performance Contractor's original estimate, also attached.
The agreed upon changes to scope of work and/or Home Performance Contractor charges are as follows:

Please specify efficiency level (e.g., AFUE, SEER, R-Value).

______________________________ $ __________
______________________________ $ __________
______________________________ $ __________
______________________________ $ __________
______________________________ $ __________

Difference from Original Estimate: $ __________

All other terms of the attached estimate are also incorporated into this Field Change Order. In order to be eligible for program incentives, the additional work authorized by this Field Change Order requires Home Performance with ENERGY STAR Program approval prior to work being performed. Failure to notify program of change prior to work being performed will result in forfeiture of incentives covering the work authorized herein.

If the work is to be financed through NY Home Performance with ENERGY STAR Financing, the Customer must also complete and sign a revised **Loan Agreement for NY Home Performance with ENERGY STAR Financing.** The revised Loan Agreement will combine the original contract amount, as well as all Change Orders. Until and unless the revised Loan Agreement is executed, Contractor will only receive payment for work that received prior approval. Payment of any additional amount is the responsibility of the Customer.

IN WITNESS WHEREOF, the parties have executed this contract as of the date written below.

Homeowner	Home Performance Contractor
Address	Company Name
Date	Date

Please submit this form through NY HP Portal

HPwES Sec 8-5 Page 1 of 1 Revised September 2015

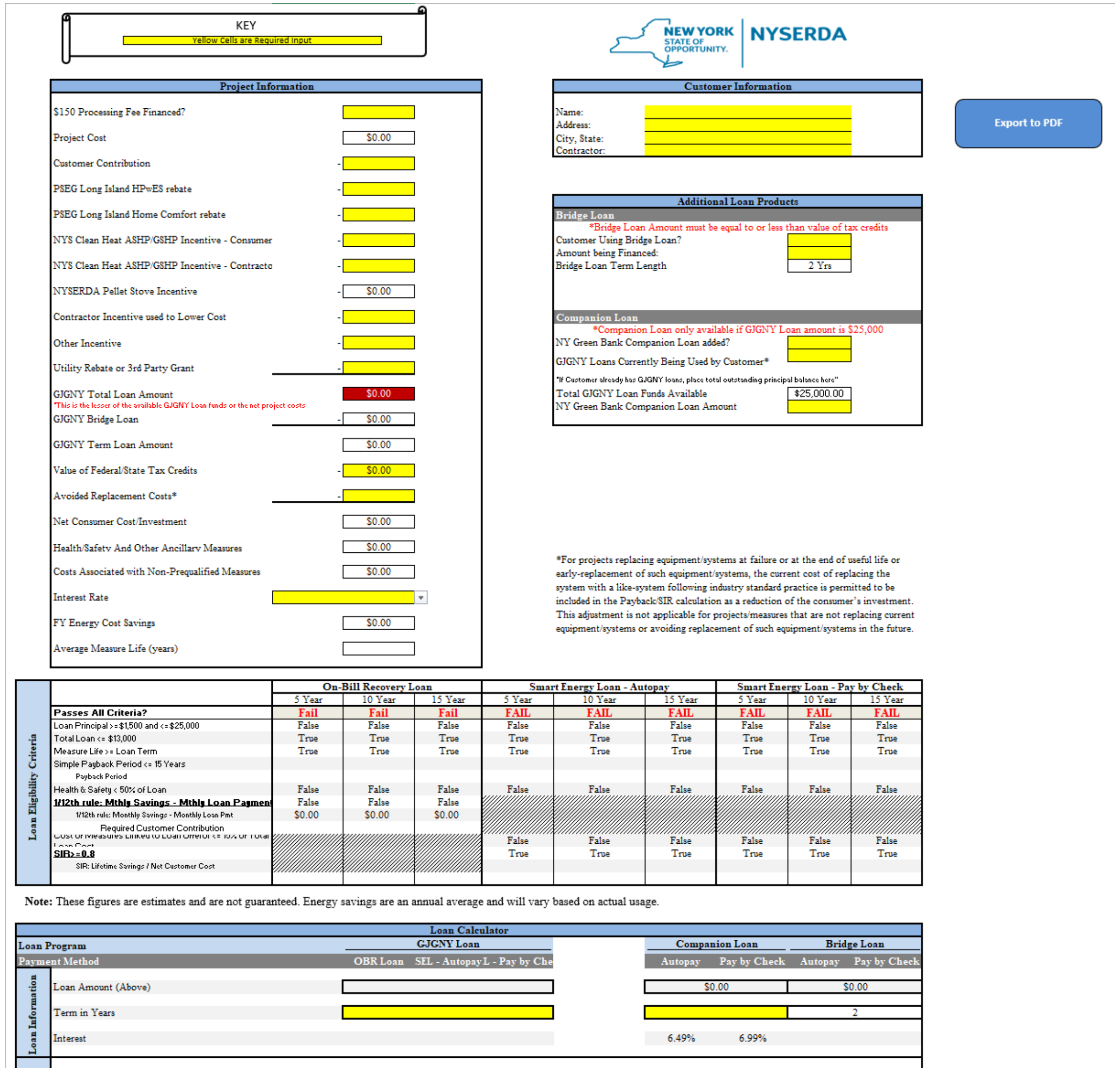
Program Documents & Forms

ProForma

NYSERDA website > Resources for Participating Contractors: https://www.nyserda.ny.gov/All-Programs/Become-a-Contractor/Become-a-Loan-offering-Contractor/Resources-for-Participating-Contractors

In July 2021, financing was decoupled from the NY HP Portal workflow. Projects requiring financing need to utilize the ProForma worksheet that applies to their project type.

- Contractors should follow the instructions provided on the site and send ProFormas directly to Slipstream (formerly EFS) for Finance Only approval: Workscope@EnergyFinanceSolutions.com
- A Certificate of Completion and signed contract need to be sent to Slipstream to close-out the Loan.
- Since the NY HP Portal does not communicate with Slipstream, contractors must send a revised ProForma to Slipstream if there are any changes to a project's cost.



KEY
Yellow Cells are Required Input

NEW YORK STATE OF OPPORTUNITY. | NYSERDA

Export to PDF

Project Information

$150 Processing Fee Financed?	
Project Cost	$0.00
Customer Contribution	-
PSEG Long Island HPwES rebate	-
PSEG Long Island Home Comfort rebate	-
NYS Clean Heat ASHP/GSHP Incentive - Consumer	-
NYS Clean Heat ASHP/GSHP Incentive - Contracto	-
NYSERDA Pellet Stove Incentive	- $0.00
Contractor Incentive used to Lower Cost	-
Other Incentive	-
Utility Rebate or 3rd Party Grant	-
GJGNY Total Loan Amount *This is the lesser of the available GJGNY Loan funds or the net project costs	$0.00
GJGNY Bridge Loan	- $0.00
GJGNY Term Loan Amount	$0.00
Value of Federal/State Tax Credits	- $0.00
Avoided Replacement Costs*	-
Net Consumer Cost/Investment	$0.00
Health/Safety And Other Ancillary Measures	$0.00
Costs Associated with Non-Prequalified Measures	$0.00
Interest Rate	
FY Energy Cost Savings	$0.00
Average Measure Life (years)	

Customer Information

Name:
Address:
City, State:
Contractor:

Additional Loan Products

Bridge Loan
*Bridge Loan Amount must be equal to or less than value of tax credits
Customer Using Bridge Loan?
Amount being Financed:
Bridge Loan Term Length — 2 Yrs

Companion Loan
*Companion Loan only available if GJGNY Loan amount is $25,000
NY Green Bank Companion Loan added?
GJGNY Loans Currently Being Used by Customer*
If Customer already has GJGNY loans, place total outstanding principal balance here
Total GJGNY Loan Funds Available — $25,000.00
NY Green Bank Companion Loan Amount

*For projects replacing equipment/systems at failure or at the end of useful life or early-replacement of such equipment/systems, the current cost of replacing the system with a like-system following industry standard practice is permitted to be included in the Payback/SIR calculation as a reduction of the consumer's investment. This adjustment is not applicable for projects/measures that are not replacing current equipment/systems or avoiding replacement of such equipment/systems in the future.

Loan Eligibility Criteria

	On-Bill Recovery Loan 5 Year	10 Year	15 Year	Smart Energy Loan - Autopay 5 Year	10 Year	15 Year	Smart Energy Loan - Pay by Check 5 Year	10 Year	15 Year
Passes All Criteria?	Fail	Fail	Fail	FAIL	FAIL	FAIL	FAIL	FAIL	FAIL
Loan Principal >= $1,500 and <= $25,000	False	False	False	False	False	False	False	False	False
Total Loan <= $13,000	True	True	True	True	True	True	True	True	True
Measure Life >= Loan Term	True	True	True	True	True	True	True	True	True
Simple Payback Period <= 15 Years Payback Period									
Health & Safety < 50% of Loan	False	False	False	False	False	False	False	False	False
1/12th rule: Mthly Savings - Mthly Loan Payment	False	False	False						
1/12th rule: Monthly Savings - Monthly Loan Pmt	$0.00	$0.00	$0.00						
Required Customer Contribution Cost of Measures Linked to Loan Offer or <= 15% of Total Loan Cost				False	False	False	False	False	False
SIR >= 0.8 SIR: Lifetime Savings / Net Customer Cost				True	True	True	True	True	True

Note: These figures are estimates and are not guaranteed. Energy savings are an annual average and will vary based on actual usage.

Loan Calculator

Loan Program	GJGNY Loan			Companion Loan		Bridge Loan	
Payment Method	OBR Loan	SEL - Autopay	L - Pay by Che	Autopay	Pay by Check	Autopay	Pay by Check
Loan Amount (Above)				$0.00		$0.00	
Term in Years						2	
Interest				6.49%	6.99%		

Loan Information

Program Documents & Forms

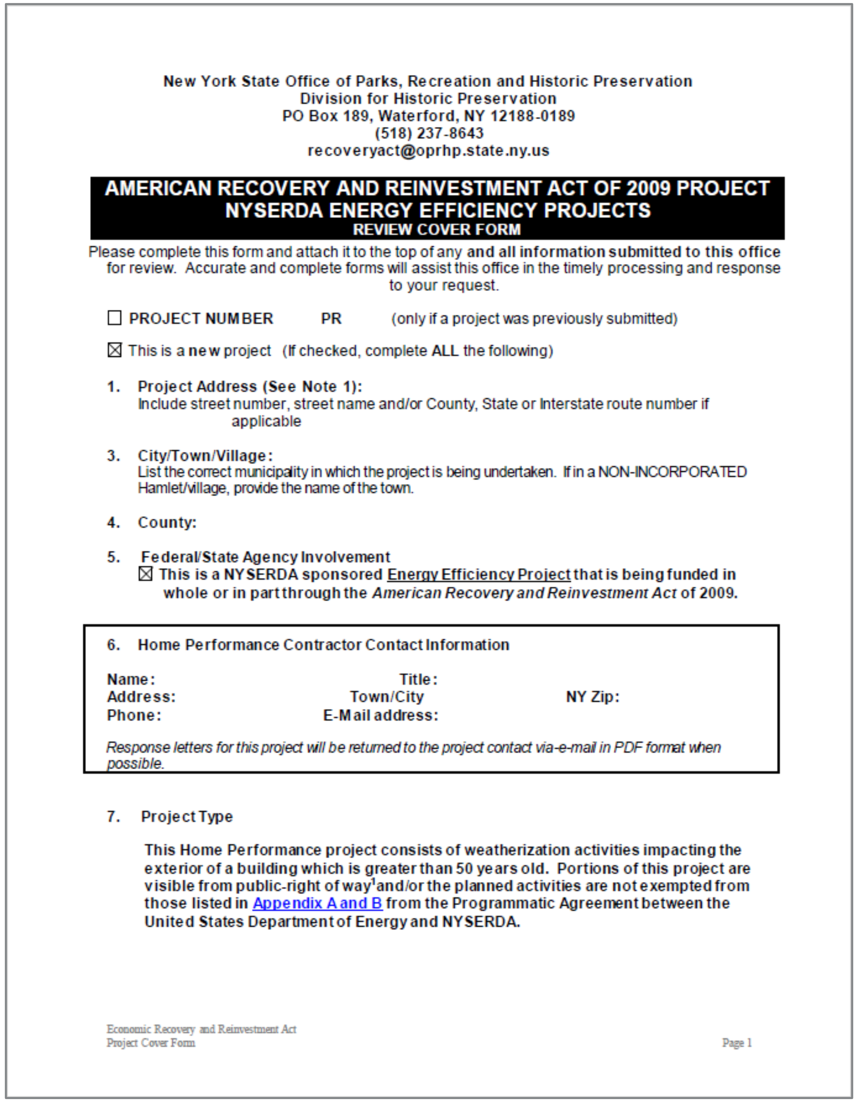
State Historic Preservation Office Form (SHPO)

CRM Section 8.1d

Only required to be submitted if the answer is YES to all three questions below:

- Is the home more than 50 years old?
- Will original windows, replacement windows installed more than 45 years ago, or doors be replaced as part of workscope?
- Is the work to be performed visible from a public right of way?

Historically, this has only occurred in rare instances.



New York State Office of Parks, Recreation and Historic Preservation
Division for Historic Preservation
PO Box 189, Waterford, NY 12188-0189
(518) 237-8643
recoveryact@oprhp.state.ny.us

AMERICAN RECOVERY AND REINVESTMENT ACT OF 2009 PROJECT
NYSERDA ENERGY EFFICIENCY PROJECTS
REVIEW COVER FORM

Please complete this form and attach it to the top of any **and all information submitted to this office** for review. Accurate and complete forms will assist this office in the timely processing and response to your request.

☐ **PROJECT NUMBER** PR (only if a project was previously submitted)

☒ This is a **new** project (If checked, complete **ALL** the following)

1. **Project Address (See Note 1):**
Include street number, street name and/or County, State or Interstate route number if applicable

3. **City/Town/Village:**
List the correct municipality in which the project is being undertaken. If in a NON-INCORPORATED Hamlet/village, provide the name of the town.

4. **County:**

5. **Federal/State Agency Involvement**
☒ **This is a NYSERDA sponsored Energy Efficiency Project that is being funded in whole or in part through the *American Recovery and Reinvestment Act* of 2009.**

6. **Home Performance Contractor Contact Information**

Name: **Title:**
Address: **Town/City** **NY Zip:**
Phone: **E-Mail address:**

Response letters for this project will be returned to the project contact via e-mail in PDF format when possible.

7. **Project Type**

This Home Performance project consists of weatherization activities impacting the exterior of a building which is greater than 50 years old. Portions of this project are visible from public-right of way[1] and/or the planned activities are not exempted from those listed in Appendix A and B from the Programmatic Agreement between the United States Department of Energy and NYSERDA.

Economic Recovery and Reinvestment Act
Project Cover Form

Page 1

Program Documents & Forms

Optional Forms

- Initial Interview Form
- Combustion Appliance Form
- Notification of Possible Presence of Asbestos
- Clean & Tune Checklist
- Optional Field Data
- Supplemental Data Collection Form

Discontinued Forms

- So What's Next Brochure
- EmPower NY Opt Out

Tier 1 – EmPower

Project Management

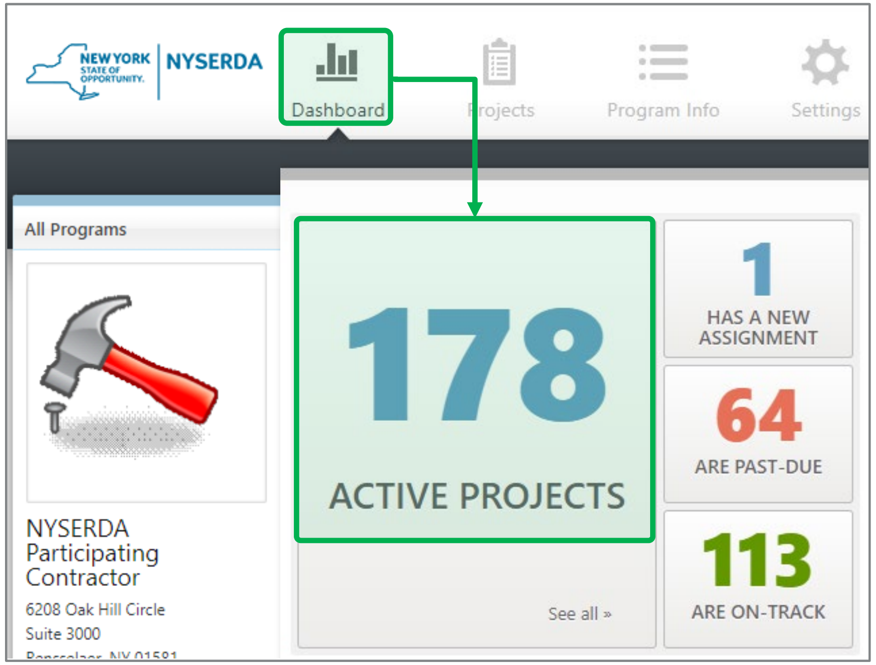
Tier 1-EmPower: Project Management

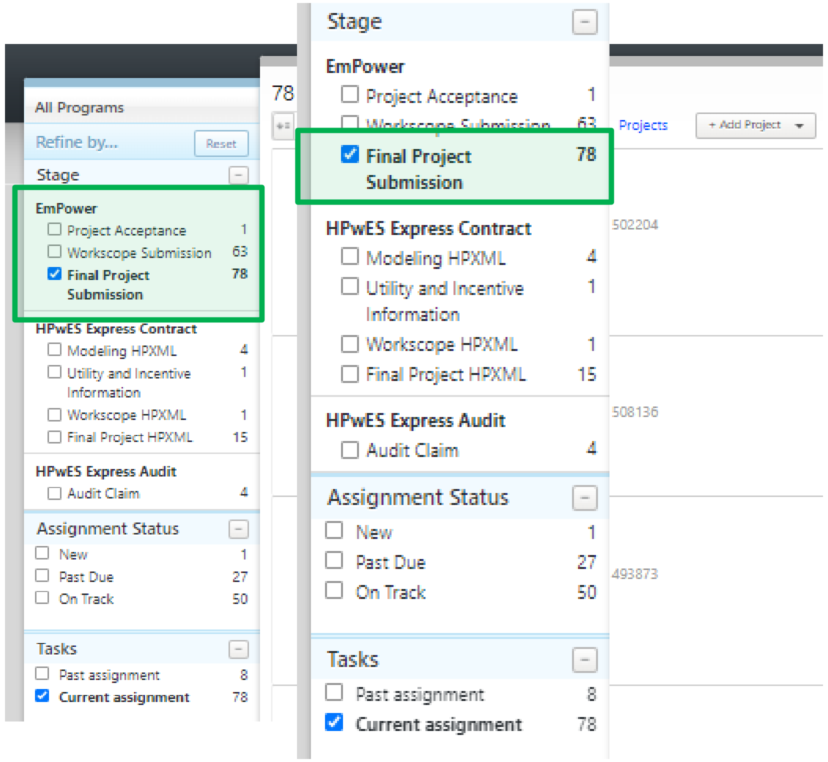
Submitting A Final Project: Tier 1-EmPower Customers

Participating Contractors are responsible for submitting projects for Tier 1 eligible customers through the EmPower workflow in NY HP Portal (Uplight).

Project Management

NY HP Portal (Uplight) → Dashboard → Active Projects → Use Filter to Refine Project List → Final Project Submission

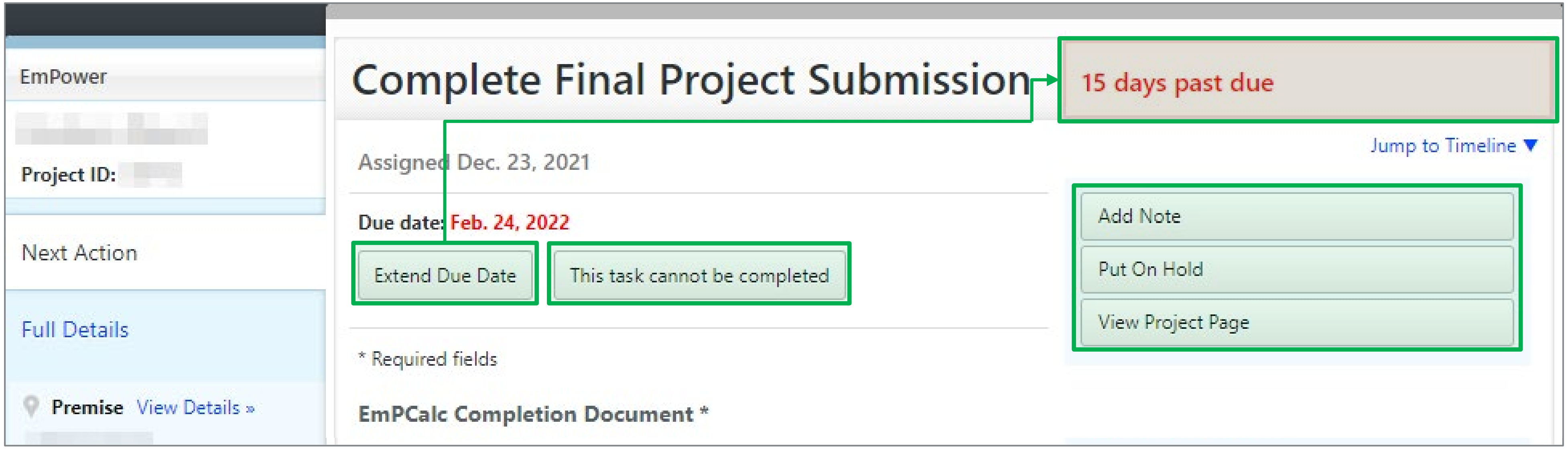




Tier 1-EmPower: Project Management

NY HP Portal: EmPower
Final Project Submission: Audit, Direct Install & Workscope
Useful Information

- **Extend Due Date:** Project management tool for task deadlines.
- **This task cannot be completed:** Used to close projects or to return a project to a previous stage.
- **Add Note:** Project level note to share information with other company users or implementation staff.
- **Put On Hold:** Temporarily removes the project from the workflow.
- **View Project Page:** Customer view of project, if they created a login.



Tier 1 – EmPower

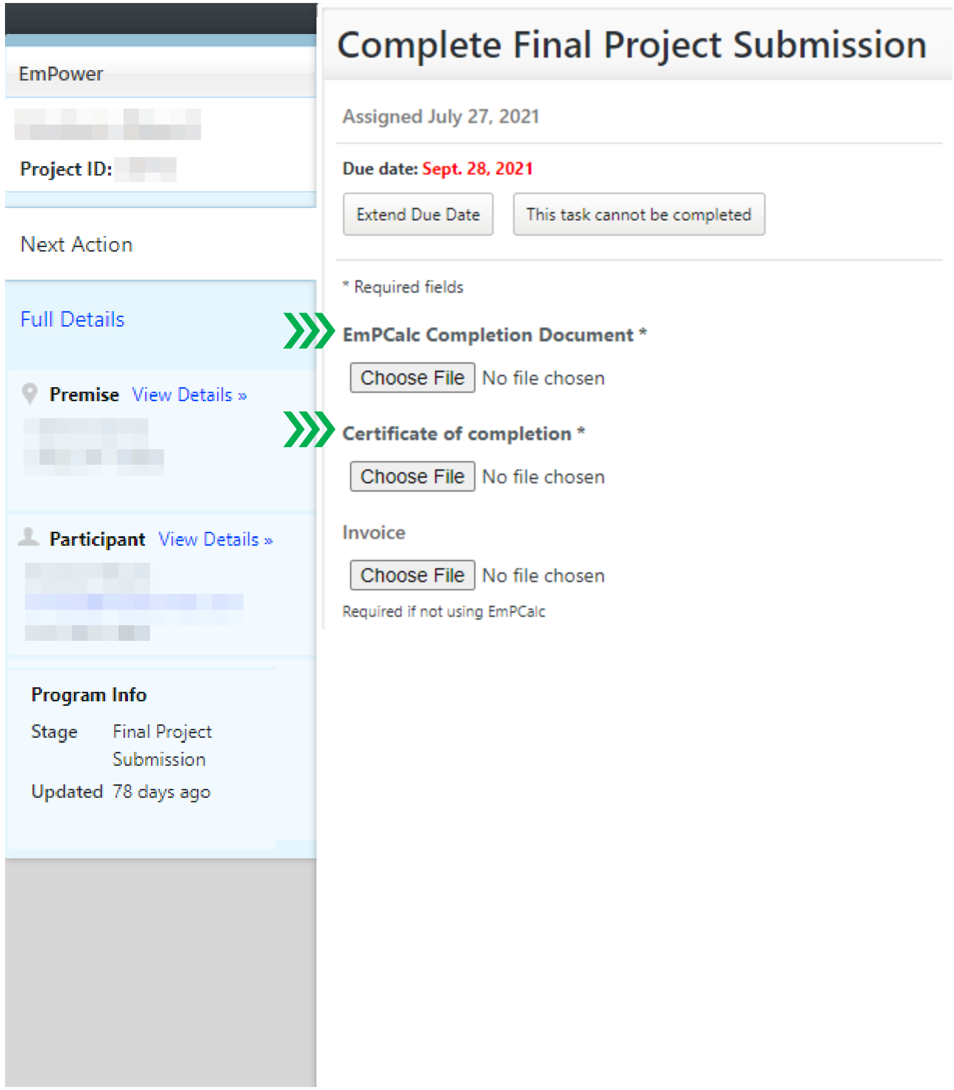
Final Project Submission

Tier 1-EmPower: Final Project Submission

NY HP Portal: EmPower
Final Project Submission: Audit, Direct Install with or without a Workscope
(1 of 2)

Complete Final Project Submission task steps.

- In *EmPCalc Completion Document* upload the EmPCalc (.XLSM file) with installed measures
- *Certificate of completion*
  - Fully completed and signed
  - Most up-to-date version should be utilized
- *Invoice*
  - Not required since EmPCalc must be used

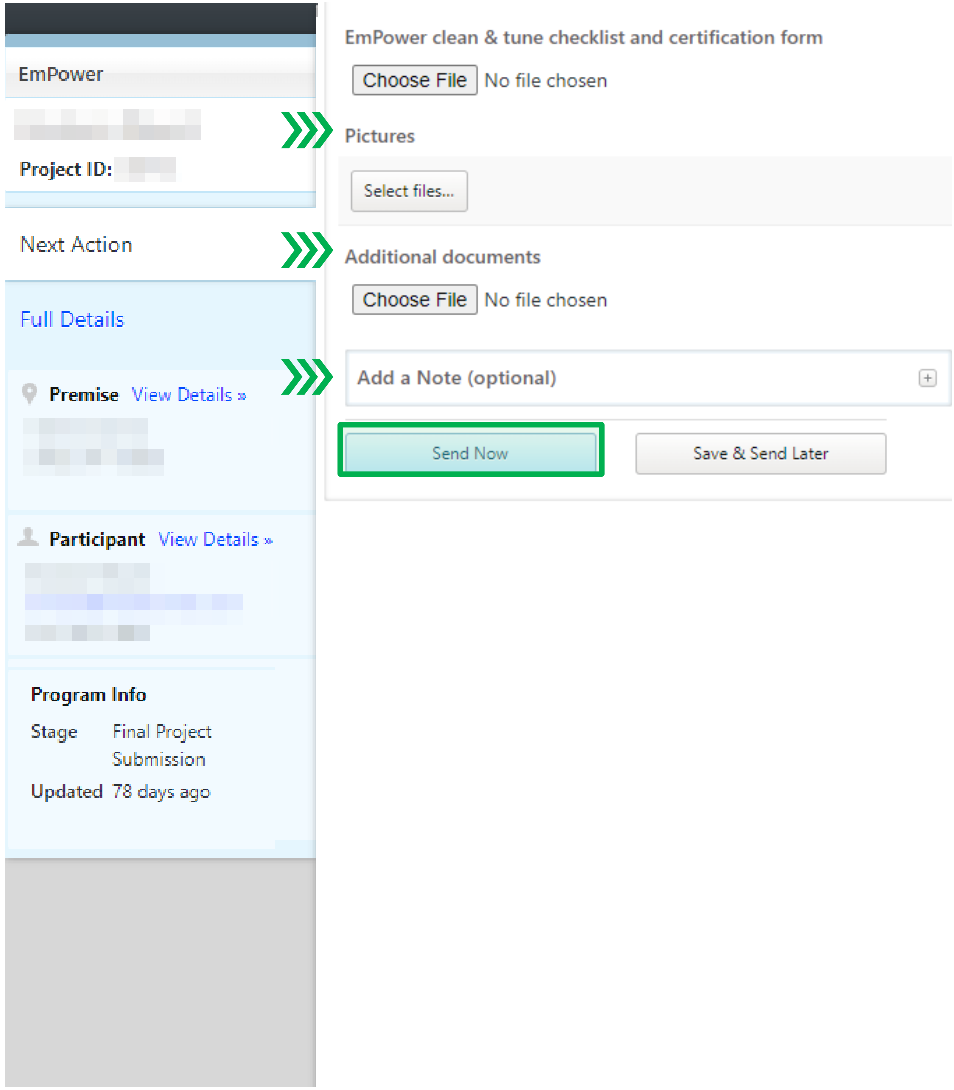


Tier 1-EmPower: Final Project Submission

NY HP Portal: EmPower
Final Project Submission: Audit, Direct Install with or without a Workscope
(2 of 2)

- *EmPower clean & tune checklist and certification form (optional)*
- *Pictures*
  - All installed measures
- *Additional documents*
  - Additional information as requested or any required documents not previously submitted.
- Use the Notes field to provide any relevant information about the project.
- Click ***Send Now*** button.

The project will be sent to the Program implementer for review and payout of incentives.



Tier 3– Assisted Home Performance

Project Management

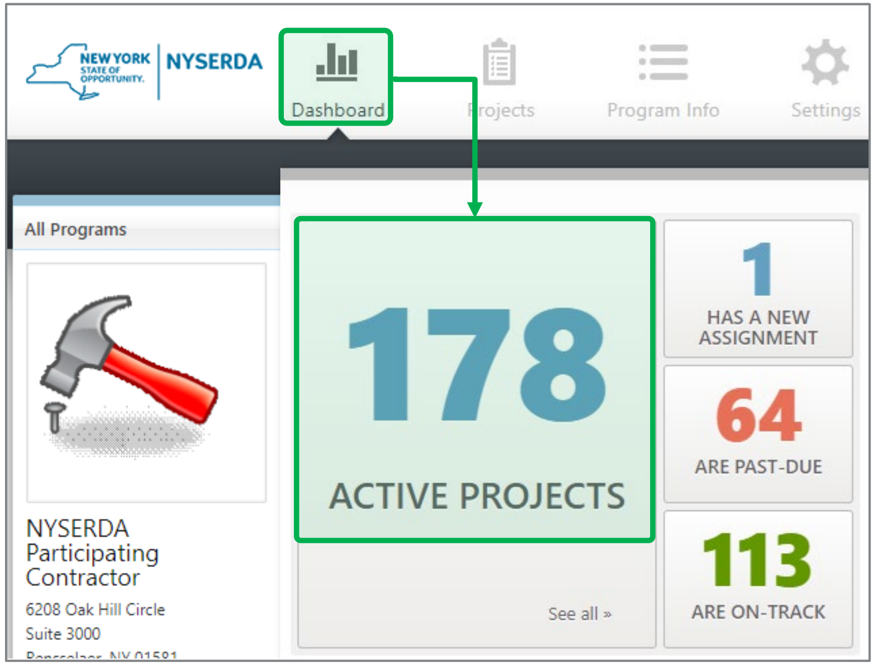
Tier 3–Assisted Home Performance: Final Project HPXML

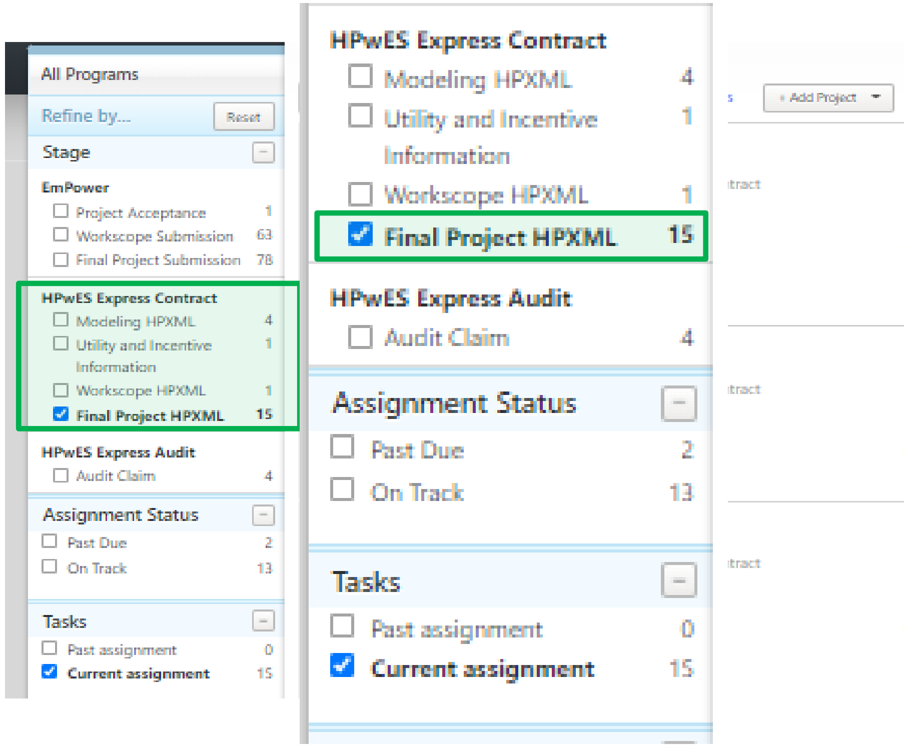
Submitting A Workscope: Tier 3-Assisted Home Performance Customers

Participating Contractors are responsible for submitting projects for Tier 3 eligible customers through the HPwES Express Contract workflow in NY HP Portal (Uplight).

Project Management

NY HP Portal (Uplight) → Dashboard → Active Projects → Use Filter to Refine Project List → Final Project HPXML





Tier 3– Assisted Home Performance

Final Project Submission

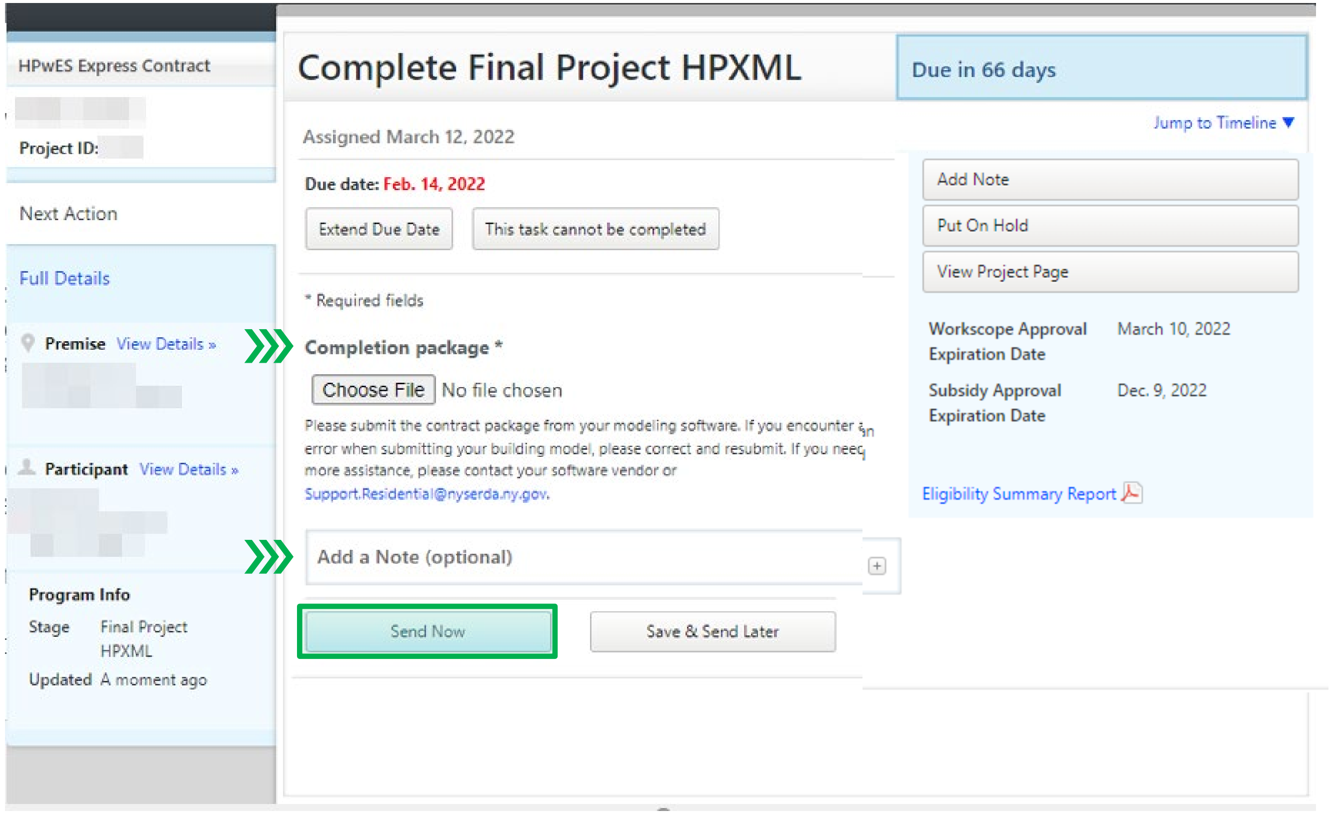
Tier 3–Assisted Home Performance: Final Project HPXML

NY HP Portal: HPwES Express Contract Submission for Payment: Workscope only
(1 of 4)

Complete Final Project HPXML task steps.

- In *Completion package* upload the **Final Project HPXML** (.XML) file generated in EmPCalc
  - Measures in the *Completion package* **must** match the submitted *Workscope* .XML file.
- Use the Notes field to provide any relevant information about the project.
- Click ***Send Now*** button.

The project now moves to Final Project Documents.



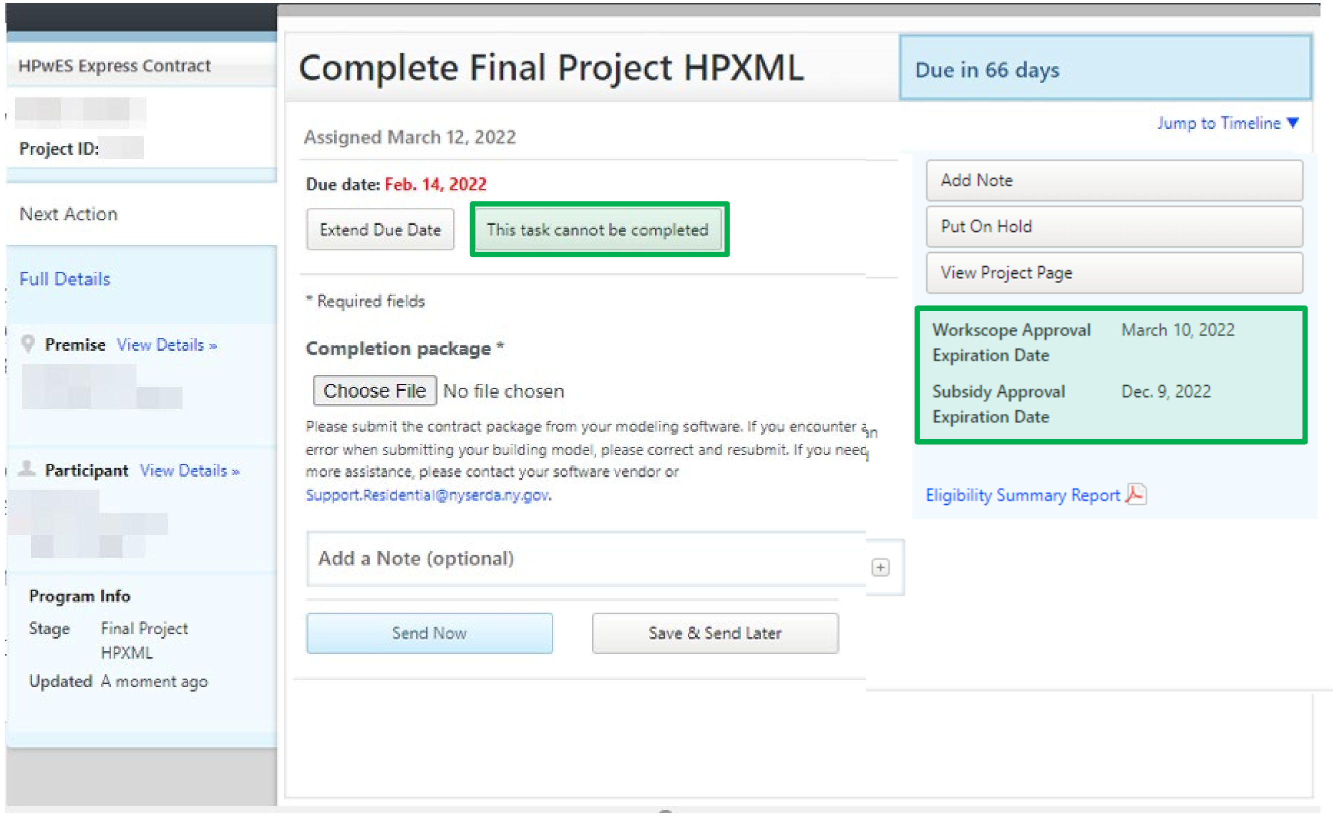
Tier 3–Assisted Home Performance: Final Project HPXML

NY HP Portal: HPwES Express Contract Submission for Payment: Workscope only

(2 of 4)

- If changes need to be made to the workscope, project can be rolled back by selecting **This task cannot be completed** and selecting the appropriate option.
- The Workscope and Subsidy Approval Expiration Dates show on the right.
  - If the workscope approval expires, the system will automatically roll the project back for re-approval.
  - A new Workscope HPXML file will need to be submitted in the Workscope HXML stage and submitted for approval.
  - Once a new approval is issued, then the project can proceed to Final Project HPXML stage.

Projects cannot be moved forward without a new approval.

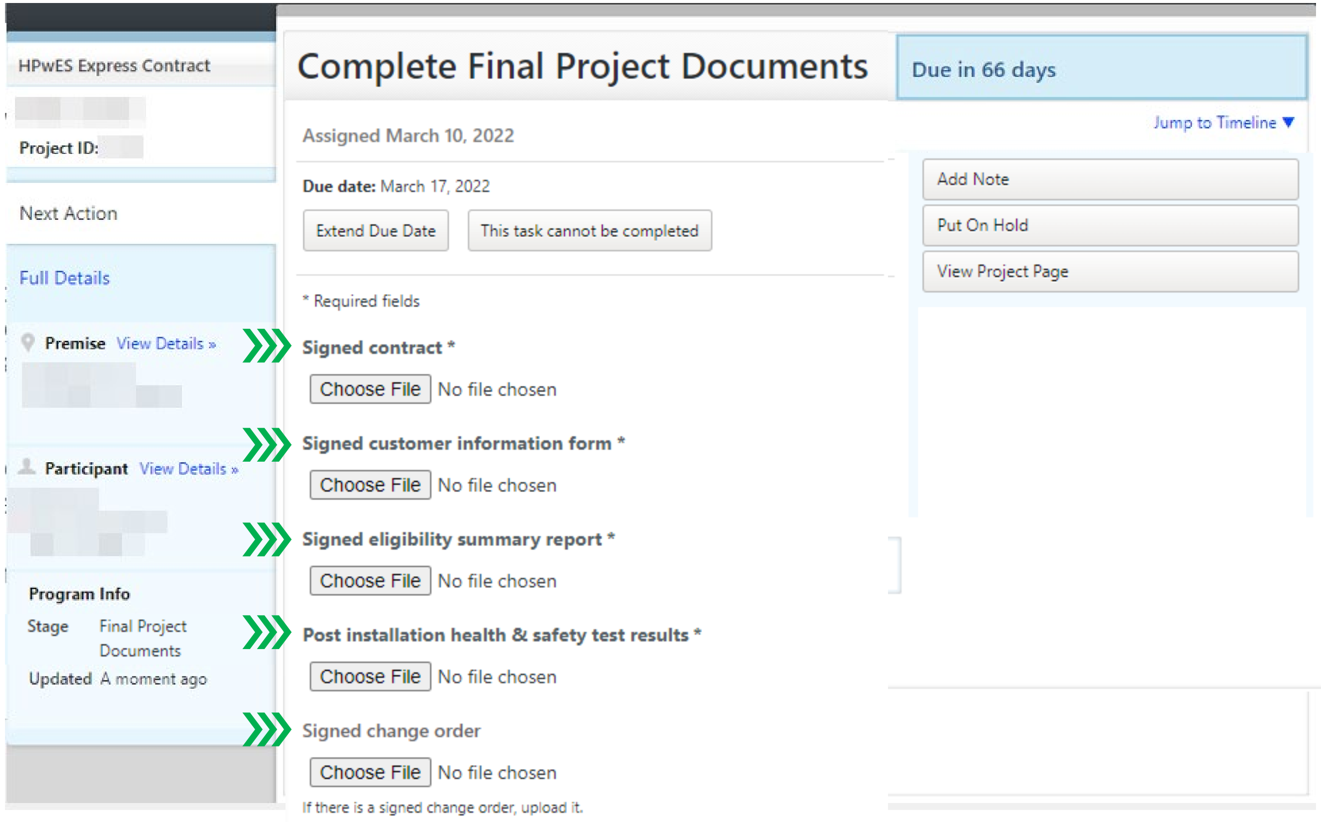


NY HP Portal: HPwES Express Contract Submission for Payment: Workscope only

(3 of 4)

Complete Final Project Documents task steps.

- *Signed contract*
- *Signed customer information form*
  - Document discontinued and not required; however, an upload is required for this field. Any document can be uploaded here.
- *Signed eligibility summary report*
  - Document discontinued and not required; however, an upload is required for this field. Any document can be uploaded here.
- *Post installation health & safety test results*
  - Upload the *Certificate of Completion*.
- *Signed change order*
  - Must be submitted, if applicable.



Tier 3–Assisted Home Performance: Final Project HPXML

NY HP Portal: HPwES Express Contract Submission for Payment: Workscope only
(4 of 4)

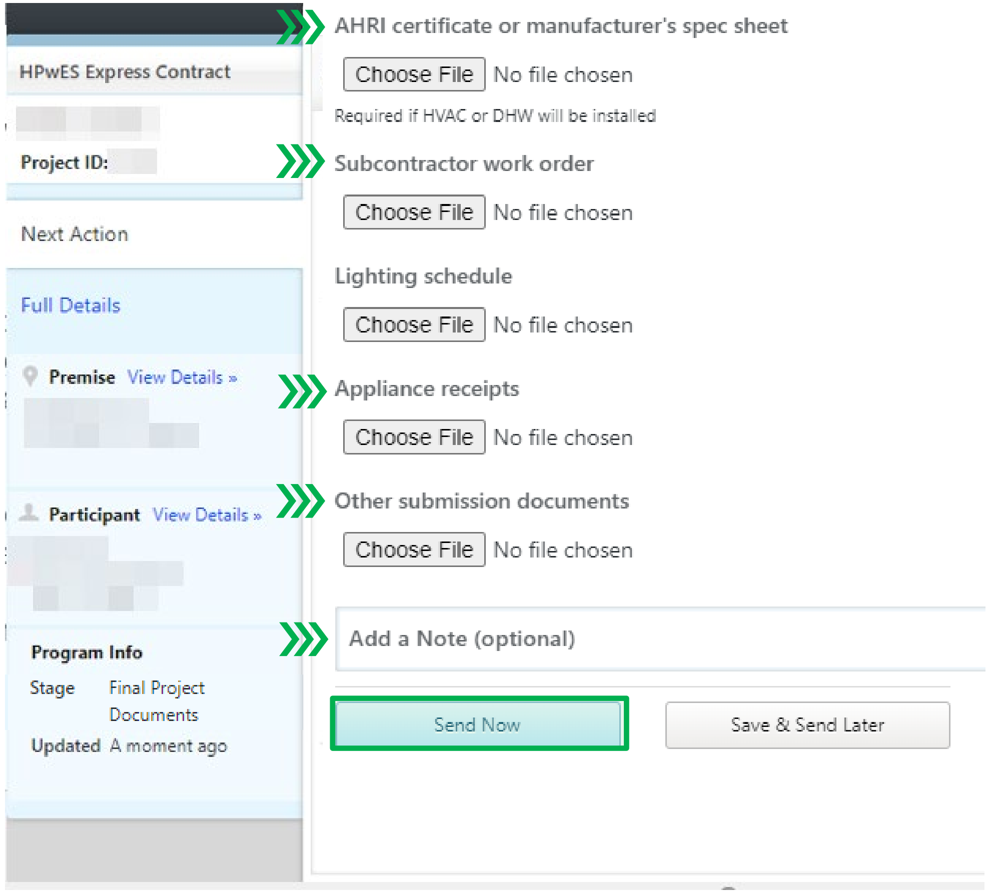
Include additional forms as needed:

- *AHRI certificate or manufacturer's spec sheet*
- *Subcontractor work order*
  - Subcontract must be between Contractor and Subcontractor not Subcontractor and Customer (unless an abatement measure).
- *Lighting schedule* (discontinued)
- *Appliance receipts*
  - Unit must have been purchased after the audit date
- *Other submission documents*

- Use the Notes field to provide any relevant information about the project.

- Click *Send Now* button.

The project will be sent to the Program implementer for review and payout of incentives.



Payment

Post Audit

Payment Processing Timelines

Tier 1-
EmPower NY
Completed Date

OR

Tier 3-
Assisted Home Performance
Reporting Date

Payment may take up to
14 days,
missing documentation may result in payment delays

Quality Assurance

Quality Assurance

All contractors working in NYSERDA's programs will be subject to randomly selected project inspections.

NYSERDA conducts a minimum of three field inspections for each new participating contractor. New contractors who have not passed three inspections are listed as **Provisional**. Assuming good standing after three inspections, their status is promoted to **Full**.

Full status contractors have a target inspection rate of 15%, with a minimum of one (1) inspection per quarter.

Contractors with a **Probationary** or **Suspended** status may have 100% of their projects inspected.

Inspection Scheduling

Customers contacted by NYSERDA's Quality Service Provider to schedule a field inspection will have the option of allowing the Participating Contractor to be present at the time of inspection. If the customer agrees, the Participating Contractor shall be notified of the upcoming inspection via email (to the company contact on file) as well as through the NYSERDA Salesforce Portal and will have the opportunity to RSVP.

Customers have the right to request that the Participating Contractor *not* attend the field inspection. In these situations, the Participating Contractor will not be notified of the scheduled inspection but will receive the result of the inspection within five (5) business days after inspection.

Quality Assurance

Inspection Criteria Changes

In the past, NYSERDA's 'Material & Installation Guidelines' (MIG) were used to guide inspection criteria. However, this document has been retired.

Inspection criteria is now guided by:

- Residential Building Code.
- Manufacturer's Specifications.
- Program Requirements (found in Contractor Resource Manual).

Inspection Checklist

For a comprehensive list of updated inspection scoring criteria, please refer to the newly developed QA Residential Inspection Checklist (CRM Section 10.2), located on the Contractor Support website.

Scoring

The SQA system relies on a numerical scoring criteria, with a Quality Score assigned to each inspected project. Each field inspection will receive a score from 1 to 5, where a score of 3 represents the minimum quality requirements for the Program. Scores will be provided in the Inspection report that is generated after the Inspector completes the inspection.

Quality Score of 1 or 2: Signifies a Failed Inspection with major and/or critical non-conformances

Quality score of 3, 4, or 5: Signifies a Passed Inspection with only minor or incidental non-conformances

*Contractors are expected to respond to all non-conformances in the NYSERDA Salesforce Portal within 30 days.

Score	Incidental	Minor	Major	Critical
1	*	*	>1	> 0
2	*	*	1	0
3	*	> 3	0	0
4	> 3	≤ 3	0	0
5	≤ 3	≤ 2	0	0

Printed by: [redacted] on 1/7/2022 3:47 PM.

Application No.	Grade	Score (Maximum of 5)
0000316425	Pass	5

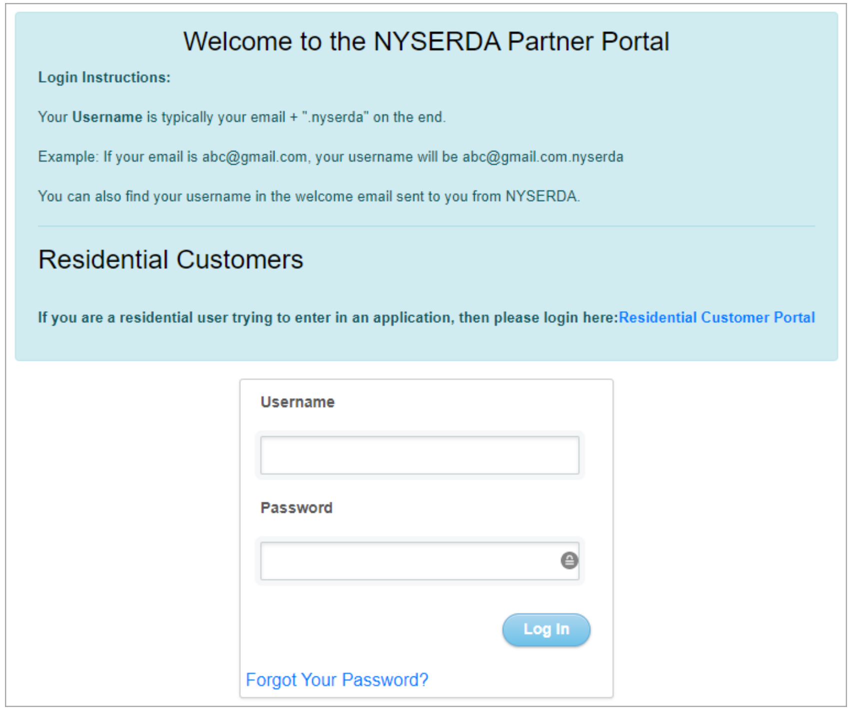
Contractor Name:	[redacted]	Report Issue Date:	1/7/2022 3:47 PM
Contractor Email:		Customer Name:	[redacted]
Builder Name:		Customer Address:	[redacted]
Builder Email:			
Project Type:	Full Comprehensive		

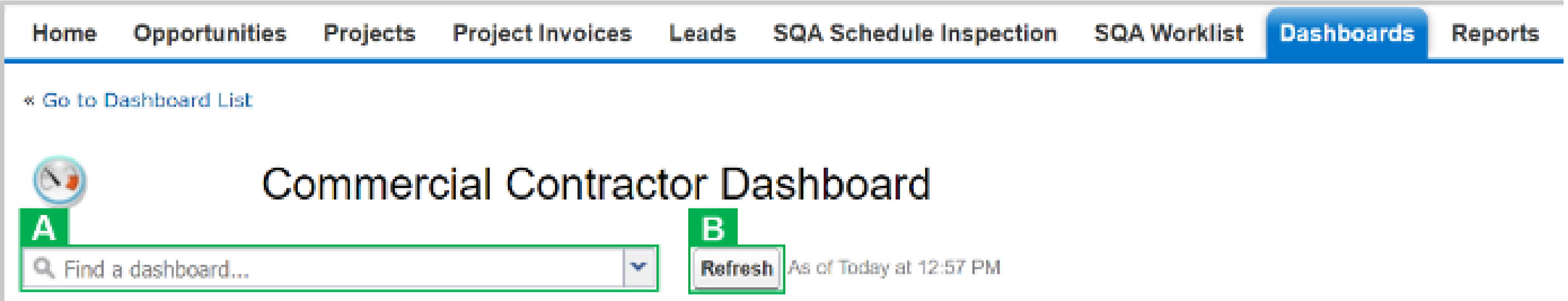
NYSERDA Salesforce Portal - Viewing Field Inspection Reports

Contractors may view all issued Field Inspection Reports in the NYSERDA Salesforce Portal. Access to this page can be found at: https://portal.nyserda.ny.gov/login.

After logging into Salesforce, click the Dashboards tab to access the Dashboard. If you have access to several dashboards, use the dropdown menu to navigate between them.

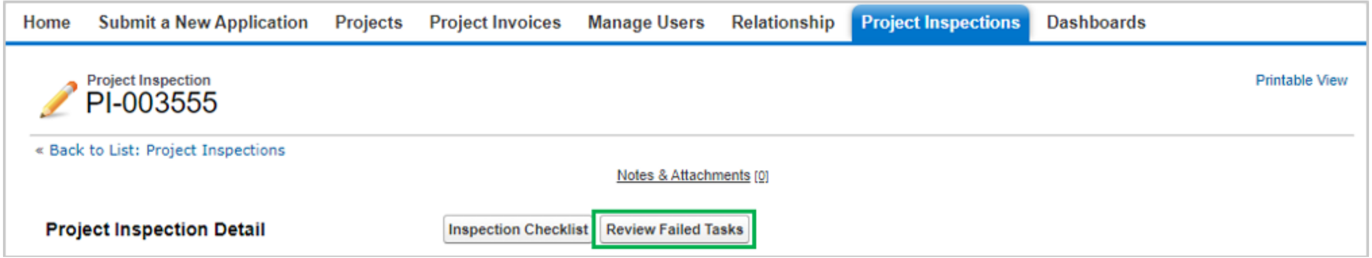
*In addition, links to individual reports will be provided via email communication sent out when an inspection is completed. These emails will go to the company contact NYSERDA has on file.





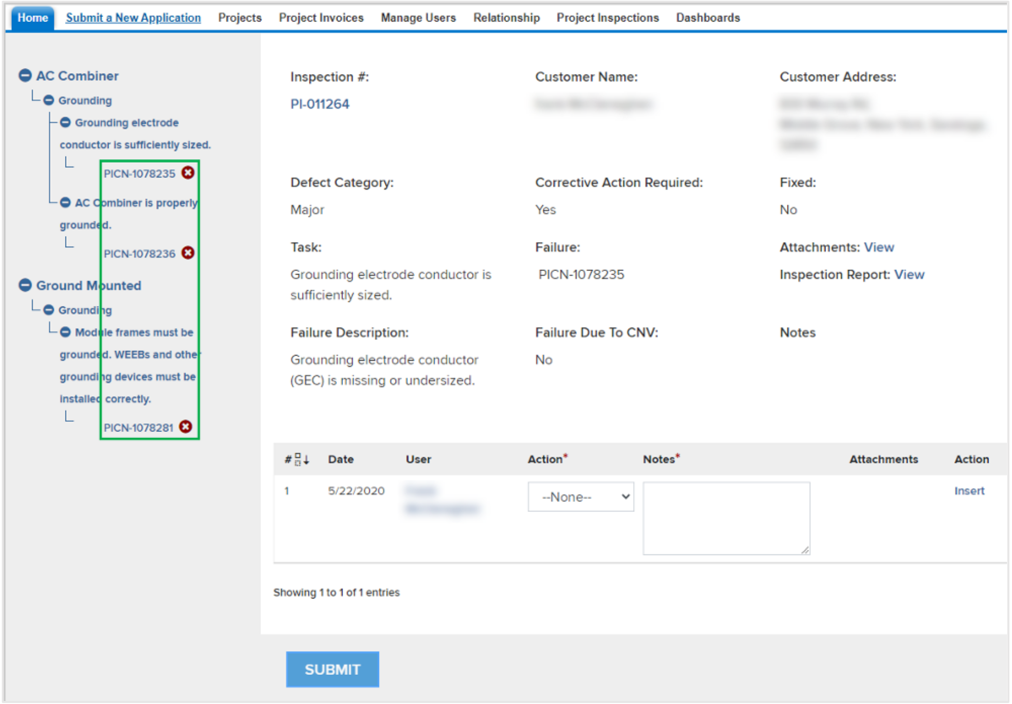
Responding to Field Inspection Reports in the NYSERDA Salesforce Portal

Corrective Action Required (CAR) tasks can be addressed through the **Review Failed Tasks** page in Salesforce.



On the Review Failed Tasks page, use the side navigation bar to locate all CAR eligible failed tasks. Major or Critical failed tasks that require a response are denoted with a Red X to the right of the task. The first failed task will already be visible.

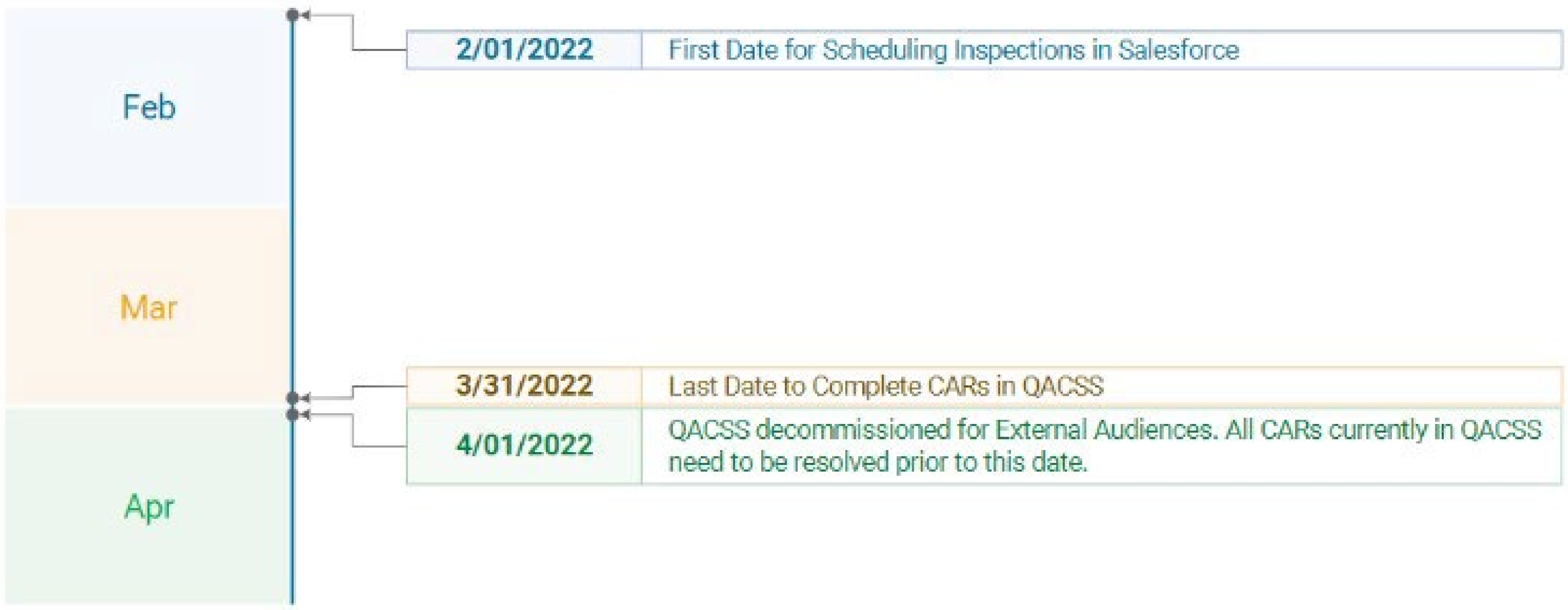
After resolving or contesting the CAR tasks, the Program Implementer will review the submitted resolution. If the resolution is approved, no further actions are necessary for that specific CAR tasks. If the resolution is denied, the Program Implementer will reach out to request additional corrections.



Quality Assurance

To Sum Up the Changes:

- Inspection Criteria Has Moved To: Residential Building Code, Manufacturer's Specifications, and Program Requirements. The MIG has been retired.
- The Quality Assurance process will now be operated in the NYSERDA Salesforce Portal. The QACSS Portal will be retired on March 31, 2022.



Quality Assurance

Take Part in the Quality Assurance Process

- Encourage customers to participate. Let them know they may be contacted or can request an inspection at any time if they have any concerns.
- Be proactive in reviewing and responding to issued inspection reports.

Utilize Resources:

- For a comprehensive step-by-step guide to viewing and addressing issued field inspection reports in the NYSERDA Salesforce Portal, please refer to the EmPower/Home Performance Knowledge Base: https://knowledge.nyserda.ny.gov/pages/viewpage.action?pageId=99877654
- To review updated inspection criteria, please refer to the newly developed QA Residential Inspection checklist, located on the Contractor Support website: CRM Section 10.2
- Make use of the Quality Assurance Policies and Procedures document provided on the Contractor Support website: CRM Section 10.1
- Reach out to Contractor Support or your Account Manager for additional assistance.

Next Steps/Action Items for Contractors

Prepare for Program Updates to Launch

- Review the latest Residential Program Announcement newsletter
- Review the Training Session Overview & timeline of events
- Have relevant staff register for the upcoming training webinars
- Visit the NYSERDA Knowledge Base and review the Combined Application Process
- Review Completion requirements with auditing staff and installation crews to incorporate updates into your processes
- Contact your Account Manager with any questions or submit them to support.residential@nyserda.ny.gov.

Stay up-to-date with Program

- Subscribe to receive Program Announcements and Updates
- Visit the Contractor Support Website to review the latest versions of the Contractor Resource Manual, download forms and EmPCalc
- Review your NY HP Portal Users, add or remove as needed
- Review your NYSERDA Portal (Salesforce) Users, add or remove as needed
- Review and update your company, insurance and payment information as needed

Q & A

Training Schedule

1	**Introduction & Overview** FEB-22 | 3:00 PM – 4:30 PM	☑
2	**Combined Residential Application Process** FEB-24 | 3:00 PM – 4:00 PM	☑
3	**Audit & Direct Install** MAR-01 | 3:00 PM – 4:30 PM	☑
4	**Eligible Measures List & EmPCalc** MAR-08 | 3:00 PM – 4:30 PM	☑
5	**Workscope Submission** MAR-10 | 3:00 PM – 4:30 PM	☑
6	**Final Project Submission & Payout** MAR-15 | 3:00 PM – 4:30 PM	☑

Q&A Sessions and Office Hours will be held to support the associated trainings:

Q & A Sessions

~~MAR-04 8:30 AM – 9:30AM | Follow up to Trainings 1-3~~
MAR-17 3:00 PM – 4:00PM | Follow up to Trainings 4-6
MAR-24 3:00 PM – 4:00PM | Follow up to Trainings 1-6

Office Hours Sessions

Session 1: APR-01 8:30 AM – 9:30AM
Session 2: APR-15 3:00 PM – 4:00PM
Session 3: APR-22 9:00 AM – 10:00AM

Questions

To ask a question:

1. Click the ? Icon in the toolbar.

2. Enter your question in the text field at the bottom, then press Enter on your keyboard.

When your question is answered, it will appear in the Questions pane. You will also see the Question icon display an indicator that there is an unread message waiting for you.