ENERGY SAVER REBATE APPLICATION
WITH UTILITY RELEASE FORM
(For Fix-up Fund loans committed 12/8/09-3/16/10 and 3/30/10-3/31/10)

Instructions to Homeowners

- Within 120 days of closing on Fix-up Fund Loan, the Fix-up Fund Borrowers (Homeowners) must submit this completed Energy Saver Rebate Application to participating Fix-up Fund Loan/Energy Saver Rebate Lender.
- Rebates will be processed only for completed rebate-eligible improvements described below.
- The full cost of the Rebate-eligible improvements must be financed with Fix-up Fund loan.
- Rebate amount is 35% of cost of completed rebate-eligible improvements that were financed with Fix-up Fund Loan.
- Required attachments to this application are:
  - Paid receipts for all rebate-eligible improvements; and
  - Utility Release Form signed by Homeowner.
- Rebate amount cannot exceed $10,000. One rebate per household.
- Rebate funds are administered by the Minnesota Housing Finance Agency and will be paid on a first-come, first-served basis.
- Questions regarding program participation, loans or lenders should be directed to **Minnesota Housing at (800) 710-8871 or go to www.mnhousing.gov**
- Questions related specifically to energy efficiency and rebate eligibility may be directed to the **Energy Information Center at (800) 657-3710 or go to www.energy.mn.gov**

Participating Energy Saver Rebate Lender _____ MHFA Fix-up Fund Loan # _____

Borrower Last Name _____ Borrower First Name _____ MI _____

Applicant Address _____ City _____ State _____ Zip _____

Fix-up Fund Loan Closing Date _____ $ Total Fix-up Fund Loan Amount _____ $ Portion of Fix-up Fund loan amount for rebate-eligible improvements _____

Building Type:	☐ Single family	☐ Condo	☐ Townhome
	☐ Duplex	☐ Triplex	☐ Fourplex

Household Size (total number of persons residing in the	$ _____ Property Value	Based on: ☐ Tax Value

improved property)		☐ Appraisal As Is ☐ Market Value/Realtor

The following Improvement Information must be completed by Contractor(s)

*Paid receipts must be attached for all requested rebate amounts.
*Cost of labor and materials, round up to the nearest dollar.
*Number of installation hours.

HEATING SYSTEM REPLACEMENT

Natural Gas or Propane furnace AFUE >= 95, Oil furnace, gas, propane or oil hot water boiler AFUE >= 90.

Fuel source:	☐ Gas	☐ Oil	☐ Propane

Existing Unit/Approx. Age:		$	# of installation hours
Energy Star Furnace/Boiler:			
Brand			
Model #			
% Efficiency			

Company Name _____ License Number _____ Phone # _____

Company Address _____ City _____ State _____ Zip _____

Contractor Signature _____ Date _____

CENTRAL A/C REPLACEMENT

Split systems; SEER >= 16 – EER >=13; Package systems: SEER >=14 – EER >= 12.

Existing Unit/Approx. Age:		$	# of installation hours
Brand			
Model #			
% Efficiency			

Company Name _____ License Number _____ Phone # _____

Company Address _____ City _____ State _____ Zip _____

_____ _____

Contractor Signature | Date

LIGHT FIXTURE REPLACEMENT

Fixtures must meet Energy Star requirements.

Brand		$	# of installation hours
Model #			
Brand			
Model #			
Brand			
Model #			

Company Name | License Number | Phone #

Company Address | City | State | Zip

Contractor Signature | Date

WINDOW REPLACEMENT

Windows must be Energy Star qualified under Federal guidelines. Not all Energy Star labeled windows qualify for Federal Energy Tax Credits.

Invoice must specify manufacturer's name and model name/number; or provide the Manufacturer's Certification or Energy Star labels from the windows.

Type of windows replaced		$	# of installation hours
Single Pane #			
Double Pane #			
Total Square Footage			

Company Name | License Number | Phone #

Company Address | City | State | Zip

Contractor Signature | Date

EXTERIOR DOOR REPLACEMENT

Exterior doors must have a U-factor and SHGC of 0.30 or less.

Invoice must specify manufacturer's name and model name/number; or provide the Manufacturer's Certification or Energy Star labels from the doors.

Number of Doors		$	# of installation hours

Company Name _____ License Number _____ Phone # _____

Company Address _____ City _____ State _____ Zip _____

Contractor Signature _____ Date _____

ATTIC AIR SEALING

Testing the air tightness of a home using a calibrated door will measure the quantity of air leakage and air sealing effectiveness. Attic air sealing is a prerequisite for wall/attic insulation rebate eligibility.

Pre-blower Door Reading	_____ cfm^{50}	$	# of installation hours
Post-blower Door Reading	_____ cfm^{50}		

Company Name _____ License Number _____ Phone # _____

Company Address _____ City _____ State _____ Zip _____

Contractor Signature _____ Date _____

INSULATION-ATTIC

Attic insulation must be combined with attic air sealing for rebate eligibility. Final R-Value >= R-44.

Type		$	# of installation hours
Depth Added			
Total Depth			
# of bags/rolls			
Total Square Footage:			

Company Name	License Number	Phone #

Company Address	City	State	Zip

Contractor Signature	Date

INSULATION-WALLS

External wall cavities must be filled with insulation. Rebate eligibility is conditioned on Attic Air Sealing being performed.

Original % filled		$	# of installation hours
Type			
# of bags/rolls			
Total Square Footage:			

Company Name	License Number	Phone #

Company Address	City	State	Zip

Contractor Signature	Date

WATER HEATER REPLACEMENT

Atmospherically vented and orphaned water heaters are eligible for replacement with a power vented or direct vented high efficiency storage or demand unit; only if an orphaned water heater currently exists or if an orphan is created due to furnace replacement.
Gas storage units >= 0.62 EF
Gas tankless units >= 0.82 EF w/ 2.5 gpm @77˚F rise.

Existing Unit Brand:		Approximate Age:	
Brand		$	# of installation hours
Model #			
Energy Factor			

Company Name	License Number	Phone #

Company Address	City	State	Zip

Contractor Signature	Date

TOTAL COST OF REBATE ELIGIBLE IMPROVEMENTS (Financed with Fix-up Fund loan)	$

TOTAL REQUESTED REBATE AMOUNT (Total Financed Cost of Eligible Improvements multiplied by 35%)	$

Contractor(s) must certify that the work listed above is eligible for the Energy Saver Rebate. Attach additional sheets as needed.

Minnesota Data Privacy Act/Tennessen Warning:

The Minnesota Data Privacy Act requires that certain information you provide on this form remain as private data. The information about you that is collected on the Energy Saver Rebate Application will be classified as either public or private data. Public data will be accessible to the public. Private data about you will be accessible only to you and State personnel who comply with program and reporting requirements. The data you give us about yourself is needed to:

- Identify you;
- Contact you in case of random program or energy use evaluation;
- Comply with certain federal and state reporting requirements;
- Evaluate program effectiveness; and
- Administer the Energy Saver Program.

If you choose to supply all of the requested data, your rebate application will be processed on a first come, first served basis in accordance with the unreserved-rebate program guidelines. If you refuse to supply data requested on the rebate application form, your application will not be processed. By submitting an application you are consenting to allow your information to be shared between Minnesota Housing Finance Agency and the Department of Commerce, Office of Energy Security.

Site Inspection and Records Audit:

Recipients shall provide the Minnesota Department of Commerce, Office of Energy Security or its designee with reasonable access during regular business hours to all records maintained with respect to all payments/received by recipients from OES and other Payers for any services rendered. OES or its designee has the right to conduct periodic site inspections for project compliance and audits of records to determine if amounts have been properly paid. OES shall provide recipient with the results of any such audits and any amounts determined to be due and owing as a result of such audits shall be promptly repaid to OES. This provision shall survive the termination of this Agreement.

Coordination with other incentive programs

- Homeowners may not receive an Energy Saver Rebate if they have received or will be receiving a rebate from the Builders Association of Minnesota (BAM) Project ReEnergize.

Some rebate-eligible improvements may also qualify for utility rebates and the Federal Energy Tax Credit for Energy Efficiency. Please assist us with the following survey question about your plans for accessing other funds

☐	I plan on applying to the Federal Energy Tax Credit		Estimated tax credit amount	$	
☐	I plan on applying for local utility rebates		Estimated utility rebate amount	$	

Certification of Rebate Applicant/Fix-up Fund Borrowers (Homeowner):

☐ I have signed and attached the Utility Release Form.

I certify that to the best of my knowledge, the information provided on this form is complete and accurate, and the work listed above is eligible for the Energy Saver Rebate.

Applicant Signature _____ Date _____

Co-Applicant on Fix-up Fund Loan (if applicable) _____ Date _____

Certification of Participating Lender for Fix-up Fund Loan – Energy Saver Rebate Program

I certify that to the best of my knowledge, the information on this form is complete and accurate.

Full Name of Organization _____ Date _____

Contact Person _____ Phone Number _____

This project was made possible by a grant from the U.S. Department of Energy and the Minnesota Department of Commerce.

UTILITY RELEASE FORM

You are participating with the Energy Saver Rebate Program which is administered by the Minnesota Housing Finance Agency and funded with American Recovery and Reinvestment Act funds through the Minnesota Department of Commerce, Office of Energy Security. This program involves energy efficiency improvement installations and may require analysis of your energy consumption history in order to report on the cumulative energy savings of the program.

I hereby give my permission to any duly authorized representative of the Minnesota Department of Commerce, Office of Energy Security to receive energy information from energy suppliers about my energy consumption.

I release the Minnesota Department of Commerce, Office of Energy Security of any and all liability for supplying or requesting such information. This shall be in effect until I state in writing that it is no longer valid, provided it's been in effect for at least 24 months.

I, _____ (please print)
authorize my utility providers to release energy usage information about my account.

Name of Heating Fuel Supplier/Gas Utility: _____

Name of Electric Utility: _____

Name on Account: _____

Street Address	City	State	Zip

If billing address is different than the above address, please provide the billing address.

Billing Street Address	City	State	Zip

The undersigned certifies that s/he is an authorized representative for the above account and has the authority to request utility billing information.

Customer Signature _____ Date _____

For further information contact: Minnesota Department of Commerce, Office of Energy Security at 85 7th Place East, Suite 500, St. Paul, MN 55101-2198
Energy Information Center: (800) 657-3710