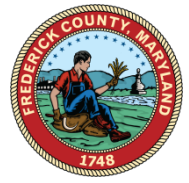




**Frederick County Office of Sustainability and Environmental Resources (OSER)
2019 Power Saver Retrofits Program (PSR)
For Moderate- and Low-Income Frederick County Homeowners**



Office Use: Date Rec. _____ PSR #: _____

1. APPLICANT (Items with * are Required)

*Name(s):	*Daytime Phone Number: <input type="checkbox"/> Check if this is best contact method.
*Physical Street Address:	Alternate Phone Number: <input type="checkbox"/> Check if this is best contact method.
*City, State, Zip Code	Email Address (*if available): <input type="checkbox"/> Check if this is best contact method.

2. COMMITMENT & GREEN HOMES CHALLENGE REGISTRATION (REQUIRED)

By participating in **Power Saver Retrofits**, I commit to learning and implementing one-time actions and everyday behaviors that save electricity, fuel, and water. **Signature (required):** _____

PSR is a special initiative of the **Green Homes Challenge**, a program that helps residents reduce energy use and utility bills, adopt environmentally friendly practices, and use renewable energy. To participate PSR, you must be registered with the Green Homes Challenge at www.FrederickGreenChallenge.org and mark as COMPLETED at least one Power Saver action.

If you need assistance, or do not have a computer or internet access, just check this box:

I need assistance with registering and using FrederickGreenChallenge.org. Please contact me.

Otherwise, check this box: (Contact Dawn Ashbacher at 301.600.6864 or DAshbacher@frederickcountymd.gov with questions).

I have registered with FrederickGreenChallenge.org and marked at least 1 Power Saver action as COMPLETE.

_____(Initial) I understand that upon completion of the PSR program, I should update my FrederickGreenChallenge.org records with PSR improvements and other commitments. If I do not, I understand that OSER staff will update my account.

3. ELIGIBILITY (Please check appropriate boxes in all sections)

3a. PREVIOUS PROGRAM PARTICIPATION: Check the programs you have already participated in to date? (Previous participation may make you ineligible for the PSR 2019 program.)

(A) County Power Saver Retrofits program in 2013 - 2018 (Repeats by contractor recommendation only.)

(B) Weatherization Assistance Program (WAP) with Frederick Community Action Agency within last 2 years

(C) EmPOWER Maryland Low Income Energy Efficiency Programs (LIEEP)

3b. HOME OWNERSHIP: NOTE! Condominiums, mobile homes, and rental properties are NOT eligible for PSR.

Do you own your home? Yes No If no, explain: _____

Approx. Home Age or Year Built: _____ Our home is a: Single-family home Duplex Townhome/Row home

3c. INCOME is defined as the **combined gross income**, taxable and non-taxable, of all household adults. It includes but is not limited to: total income from salaries, wages, tips, child support, alimony, spousal support payments, interest, dividends, rental income, Aid to Families with Dependent Children, Social Security income, Veterans benefits, disability, unemployment, retirement, and public assistance.

Annual Gross Household Income may not exceed the following. Select the category that applies to your household:

Household Size	Max. Gross Income	Household Size	Max. Gross Income	Household Size	Max. Gross Income
<input type="checkbox"/> 1 Person.....	\$69,800	<input type="checkbox"/> 4 People.....	\$99,600	<input type="checkbox"/> 7 People.....	\$123,600
<input type="checkbox"/> 2 People.....	\$79,750	<input type="checkbox"/> 5 People.....	\$107,600	<input type="checkbox"/> 8 People.....	\$131,600
<input type="checkbox"/> 3 People.....	\$89,700	<input type="checkbox"/> 6 People.....	\$115,600		

OSER Use Only: Reviewed by _____ Date: _____ Eligibility Doc Complete Approved _____ Denied

Wait Listed WL Number _____ Applicant Notified Entered in DBMS _____ Assigned to: _____

3d. GROSS INCOME DOCUMENTATION: Check one or both boxes indicating the type of documentation attached.

A copy of pages 1-2 of the previous year's federal income tax return (**Form 1040**) for each adult residing in your home (feel free to black out Social Security numbers, bank routing numbers, etc.); and/or

Documentation of other income or financial assistance (e.g., Social Security benefits, Unemployment Statement, Section 8, etc.)

4. HOME AND UTILITY INFORMATION

Utility Bill Information

____ (Initial) I understand that at the time of our Home Performance with Energy Star Audit, or initial site visit from the PSR Contractor, I will need to produce **recent copies of utility bills** (preferably those that show 12 months of usage).

Do NOT attach to this application. Please check the boxes next to the types of utility bills your household receives:

Potomac Edison Electric Town of Thurmont Electric Oil Gas Propane Other Fuel Type: _____

Wood Burning Fireplace: Do you use a wood-burning fireplace in winter? No Yes

If YES, ____ (initial) I agree to clear out all ash before the audit is performed.

4a. Health and Safety Issues and Repairs

Unvented Combustion Appliances: Do you know of any unvented combustion appliances in your home? (wood, gas, or oil units that do not vent exhaust gas out of the house) No Yes; Where?

Asbestos Materials: Do you know of any asbestos materials in your home including Vermiculite Insulation? No Yes

If YES, where?

Mold: Are you aware of any mold in your home? No Yes; Where?

Water: Are you aware of any water or leaks in your home? No Yes; Where?

Electrical: Do you know of any electrical problems in any part of your home, such as knob-and-tube wiring? Yes No

If YES, Where?

Clutter: Would your stored or unused household items prevent a contractor from easily and safely working on attic or basement floors, ceilings or walls? No Yes; Where? _____

If Yes, ____ (initial) I understand energy efficiency upgrades may not be made in these areas unless clutter issues are resolved prior to the home audit. I understand excessive clutter could make my home ineligible for PSR.

Health and Safety Issues and Repairs

____ (Initial) I understand that my home may have health and safety issues that could make my home ineligible for PSR unless fixed in a timely manner prior to energy efficiency upgrades. I understand that up to \$1,500 of PSR funds may be used to rectify health and safety issues (excluding clutter), but that remediation of asbestos, mold, and other issues are likely to cost more than \$1,500. If repairs exceed \$1,500 and I still want to participate in PSR, I understand that I will be responsible for repair costs over \$1,500. I understand that if health and safety repairs cannot be (a) rectified for \$1,500 and I cannot pay more for repairs, or (b) completed within 3 weeks of their identification, I may become ineligible for PSR.

4b. Understanding of Project Eligibility based on Energy Savings Requirement

____ (Initial) I understand that the Maryland Energy Administration, which funds this PSR program, requires that the estimated savings from all installed energy efficiency improvements over 10 years be equal to, or greater than, the total cost of the improvements. This is referred to as the "10 Year Payback" but does not mean that any costs need to be paid back by the homeowner. If the Payback period is determined to be more than 10 years, retrofits that may be recommended during the audit are not eligible for PSR, but could be contracted separately and be eligible for substantial Home Performance with Energy Star rebates. Talk to your PSR contractor about these rebates.

4c. Current Concerns about Home

Please tell us what concerns you have about your home that relate to energy.

- | | |
|---|---|
| <input type="checkbox"/> High Utility Bills | <input type="checkbox"/> Rooms that are too cold or too hot; Which? _____ |
| <input type="checkbox"/> Drafts | <input type="checkbox"/> Problems with Heating Systems; Describe: _____ |
| <input type="checkbox"/> Old or Leaky Windows | <input type="checkbox"/> Problems with Cooling Systems; Describe: _____ |
| <input type="checkbox"/> Cold Floors | <input type="checkbox"/> Old or Malfunctioning Appliances; Which? _____ |
| <input type="checkbox"/> Old/problematic water heater | <input type="checkbox"/> Other: _____ |

4d. Energy Efficiency Measures Your Household Has Taken in Last 5 Years

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Had Energy Audit (\$100 Home Performance with Energy Star Audit) | <input type="checkbox"/> Had no-cost Quick Home Energy Check-Up | | |
| <input type="checkbox"/> Added attic air sealing and insulation | <input type="checkbox"/> Added wall insulation | <input type="checkbox"/> Improved basement Insulation | |
| <input type="checkbox"/> Replaced windows | <input type="checkbox"/> Sealed ductwork | <input type="checkbox"/> Insulated ductwork | <input type="checkbox"/> Installed efficient furnace |
| <input type="checkbox"/> Installed efficient air conditioning system | <input type="checkbox"/> Added weatherstripping to doors/windows | <input type="checkbox"/> Installed efficient light bulbs | |
| <input type="checkbox"/> Purchased Energy Star appliances; which ones? _____ | | | |
| <input type="checkbox"/> Other: _____ | | | |

4e. PSR GOALS: What are the key things you are looking to improve about your home's comfort and energy efficiency?

5. OSER QUARTERLY NEWSLETTER

PSR participants with email addresses will receive OSER's quarterly electronic newsletter. This is a great way to stay informed about upcoming programs, opportunities, and incentives that can help your household go green, save money, and much more.

- No thank you. I do not wish to receive OSER's quarterly newsletter.

6. INTERESTED IN RENEWABLE ENERGY OR AFFORDABLE SOLAR ELECTRICITY FOR YOUR HOME?

OSER keeps abreast of cost-saving opportunities that help residents use renewable energy. Such opportunities might include purchasing electricity from wind farms or community solar projects, or reduced-cost bulk purchasing opportunities for residential solar electric arrays. If you would like to be kept informed about such opportunities, please answer the following questions.

- YES**, keep me informed about future cost-saving opportunities or workshops that help residents use renewable energy.

7. SIGNATURE (REQUIRED)

Information provided on this application is true and correct. I understand that providing incorrect information or misrepresenting information will result in disqualification. I understand that the PSR Contractor will (a) determine and prioritize recommended retrofits to achieve the greatest energy savings within the budget allocated for each home, and based on my home's characteristics, and (b) submit a Proposal to implement retrofits prioritized for energy savings for approval by me and the PSR Coordinator.

*Signature: _____ Date: _____

8. SUBMIT YOUR APPLICATION (2 OPTIONS)

- Make an in-person appointment.** Call Dawn Ashbacher at 301.600.6864
On the day of your appointment, bring this application and the following supporting documents with you:
1. A copy of pages 1-2 of the previous year's federal income tax return for each adult residing in your home, and/or
 2. Documentation of other income or financial assistance (e.g., Social Security benefits, Unemployment Statement, Section 8, etc.)
- During your appointment, you will be screened for eligibility. You will also learn about other incentives and programs that can save energy and money and you will be registered with, and learn how to use Frederick County's interactive Green Homes Challenge.*
- EMAIL, FAX, or MAIL your application and the supporting documents listed immediately above to Dawn Ashbacher.**
Email: DAshbacher@FrederickCountyMD.gov **FAX:** 301.600.2054
Mail: Dawn Ashbacher, Office of Sustainability and Environmental Resources, 30 N. Market St., Frederick, MD 21701
We'll contact you about program acceptance and, if needed, help you get started with the interactive Green Homes Challenge.

Frederick County 2019 Power Saver Retrofits

Homeowner Agreement and Release of Liability

(1) I, _____ (print name), hereby agree to participate, if selected, in Frederick County’s Power Saver Retrofits (PSR) Program coordinated by the Frederick County Office of Sustainability and Environmental Resources (OSER).

(2) _____ (*initial*) I understand that to be eligible for participation the PSR Program, I must qualify as moderate- or low-income based on family size and gross income:

1-Person Household	2-Person Household	3-Person Household	4-Person Household	5-Person Household	6-Person Household	7-Person Household	8-Person Household
\$69,800	\$79,750	\$89,700	\$99,600	\$107,600	\$115,600	\$123,600	\$131,600

(3) _____ (*initial*) I understand that my home must be located in Frederick County, Maryland in order to be eligible for PSR. I understand that I must register for the Green Homes Challenge and work toward Power Saver Certification in order to be eligible for PSR.

(4) _____ (*initial*) I understand that if selected as a PSR participant, I will accept one or more of the following residential energy retrofit services, and that services will be performed at no cost to the homeowner by a professional private contractor trained in these specific services and selected by OSER as a PSR Contractor.

- Home energy audit
- Combustion testing
- Duct testing
- Low-flow aerator and showerhead installation
- Light bulb replacement
- Programmable thermostat installation
- Carbon monoxide detector installation
- Hot water heater wrap installation
- Hot water pipe insulation
- Attic air sealing and insulation
- Attic access air sealing and insulation
- Basement/crawlspace air sealing and insulation
- Basement/crawlspace access sealing and insulation
- Caulking/weather-stripping of windows and doors
- Duct sealing and insulation
- Appliance Upgrades (hot water heater, clothes washer, refrigerator, window A/C Unit)
- Heating or cooling system (HVAC) tune-up or upgrade to an Energy Star model
- Health and safety repairs if needed prior to air sealing and insulation

(5) _____ (*initial*) I understand that the following are NOT INCLUDED in the PSR Program:

- Window improvements or replacements (unless a broken window meets health and safety repair criteria)
- Replacement of stoves or ovens
- Replacement of a stand-alone furnace or air conditioning unit, without other energy efficiency measures
- Duct work additions or replacements except as needed to install upgraded equipment

(6) _____ (*initial*) The grant funding the PSR program limits refrigerator upgrade costs to \$800. If an Energy Star® refrigerator upgrade is recommended for my home, I understand that refrigerator sizes and models offered through the PSR program are extremely limited. I understand that there are no options to request other models even if I am able and willing to pay the cost difference.

(7) _____ (*initial*) I understand that, if I am selected, a PSR Contractor will visit my home to perform a Home Performance with Energy Star audit, perform combustion appliance safety testing, and/or determine the scope of services appropriate from the above list. I understand that the PSR Contractor will determine and prioritize the retrofits recommended to achieve the greatest energy savings within the budget limits allocated for each home, and based on my home's size and characteristics: either (a) \$10,000 for audit, energy efficiency improvements, HVAC upgrades, and, if needed, health and safety repairs; or (b) \$7,000 for audit, energy efficiency improvements, and, if needed, health and safety repairs. I understand that OSER and I will both approve the PSR Contractor's proposed project list, costs, and contract before the work is undertaken. I understand that OSER may assess the completed work before payment is made to the PSR Contractor. I agree to be available at home when the PSR Contractor comes to do the audit, the retrofit work, and the test-out procedures and follow-up educational consult (2-5 visits).

(8) _____ (*initial*) If selected as a participant in PSR, I understand that there is no cost or fee to participate and that OSER will pay up to either \$7,000 or \$10,000 only for recommended eligible projects that will result in energy savings over a 10-year period that are equal or greater than the total cost of the improvements (total cost of energy improvements/estimated annual utility bill savings = 10 or less).

(9) _____ (*initial*) I understand that if I want recommended weatherization improvements that exceed either the \$7,000 or \$10,000 cap, and I am willing to pay for them myself, I will contract for these services independently and directly with the PSR Contractor and that in such case OSER will NOT act in any administrative or oversight capacity in connection with the additional improvements. Upon completion of any independently contracted work, I will submit my required payment directly to the PSR Contractor. I understand that any expenses paid for by OSER will not be eligible for a federal energy tax credit or Potomac Edison Home Performance with Energy Star Rebates or Residential HVAC rebates. I understand that projects I pay for (over the \$7,000 or \$10,000 limit) may be eligible for rebates or tax credits and that I am responsible for determining eligibility by consulting with the PSR Contractor, the utility rebate program, and my tax advisor.

(10) _____ (*initial*) I understand that if the audit determines that my heating or cooling system (HVAC) needs to be upgraded to an Energy Star model, that only the Energy Star rated heat pump, furnace, or boiler models offered by the PSR contractor are available for installation. I understand that I cannot request any substitute models even if I am willing to pay the additional cost for a substitute model and regardless of the efficiency rating of a substitute model.

(11) _____ (*initial*) I understand that up to \$1,500 of the \$7,000 or \$10,000 limits may be used for health and safety repairs deemed necessary by the PSR Contractor before air sealing, insulation, or other energy efficiency improvements or upgrades can occur. I understand that the PSR Contractor or OSER may determine that this work cannot be performed. Reasons for not being able to perform this work include (but are not limited to) necessary health and safety repairs that will cost more than \$1,500; the presence of hazardous conditions such as mold or unsafe electrical wiring; significant structural problems; evidence of water infiltration; failure of combustion appliance safety testing; presence of unvented combustion appliances in the living space; inability to access work spaces; excessive clutter; rodent or other pest evidence; or other unsafe or unsanitary conditions. If the Contractor determines that work cannot be performed, I understand that my house will be removed from the PSR program.

(12) _____ (*initial*) If selected as a participant, I understand that I must, as needed, remove or set aside stored items in my attic, basement, or anywhere PSR work will be done, so that the PSR Contractor can seal air leaks and add insulation. This includes any temporary boards, doors, or any other objects used as walking surfaces or other barriers that cover or limit access to existing insulation, ceiling joists, rafters, knee walls, rim joists, or any other structural component of the house. I understand that Frederick County and the PSR contractors are not responsible for any problems that arise due to obstructions left where energy efficiency retrofit work is conducted. I understand that if work space is not accessible due to clutter, contractors will not perform work in that area and my house may be removed from the PSR program.

(13) _____ (*initial*) I understand that OSER may conduct a short educational consult and/or a walk-through inspection of the PSR work once it is completed by the PSR Contractor. I understand that I must allow for scheduling and home access for an educational consult and walk-through within three weeks of the retrofit completion.

(14) _____ (*initial*) If selected as a participant, I consent to the sharing of my energy audit report results, combustion testing results, duct testing results, blower door testing results, utility and energy supplier information, proposed projects, contractor project agreement, and photos of homeowner and completed projects with OSER and, if requested, the Maryland Energy Administration. I agree to respond to a post-retrofit survey regarding my experience.

(15) _____ (*initial*) I understand that my participation in PSR is contingent upon the approval and maintenance of grant funding for PSR by the Maryland Energy Administration, and on Frederick County's ability to secure contracts with qualified PSR Contractors for performance of the PSR work.

(16) _____ (*initial*) I understand that the retrofit funding amount may or may not be considered taxable income. I will consult with my tax advisor for additional guidance.

(18) _____ (*initial*) By my signature below, I hereby state that I am 18 years of age or older and that I am an owner of the property at the address below. I recognize that Frederick County, OSER, and their staff, and agents have not undertaken any duty or responsibility for my safety or any duty, responsibility, or warranty with regard to the work provided as a part or as a result of this Agreement. I hereby release and covenant not to sue or make any claims of any type against Frederick County and/or their directors, officers, employees, and/or other agents arising out of or related in any way (either in whole or in part) to my participation in PSR. The PSR Contractor is an independent contractor and is not an agent or employee of Frederick County or OSER for the purposes of this agreement.

(19) _____ (*initial*) By my signature below, I warrant that I am not relying on any oral representations, statements, or inducements apart from the statements made on this form.

I have read this entire Agreement and Release and I fully understand it. I am aware that this agreement has legal implications, including but not limited to, a release of liability, and I agree to be legally bound by it.

Home Owner Signature Block: (REQUIRED)

Signed: _____ Date: _____

FULL printed name: _____

Address: _____ Zip code: _____

Primary Daytime Phone _____ Alternative Daytime Phone: _____

Email: _____



REQUIRED: Witness Signature Block (Can be anyone who knows you):

Witness signature: _____ Printed Name: _____ Date: _____

Co-Owners Signature Block (Required, If Applicable)

The co-owners of our home acknowledge and agree to each of the terms and conditions of this Agreement.

FULL name(s) of Co-owners of property: _____

Signatures of Co-owners of property: _____