



Frederick County Division of Energy & Environment (DEE)

Department of Climate & Energy (DCE)

2023 Power Saver Retrofits Program (PSR)

For Moderate- and Low-Income Frederick County Residents



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. ELIGIBILITY (Please check appropriate boxes in all sections)

3a. PREVIOUS PROGRAM PARTICIPATION: (Previous participation may make you ineligible for the current PSR program.)

I have previously participated in a weatherization program No Yes; _____

3b. HOME INFORMATION: NOTE! Condos, mobile homes, and rental properties must be reviewed by PSR Coordinator.

Do you rent or own your home? Rent Own

If Renter, list the name and phone number for landlord: _____ Phone Number: _____

Approx. Home Age or Year Built: _____

Our home is a: Single-family home Duplex Townhome/Row home Condo Mobile/Manufactured

3c. GROSS HOUSEHOLD INCOME

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.....	\$66,938	<input type="checkbox"/> 4 People	\$95,625	<input type="checkbox"/> 7 People	\$118,575
<input type="checkbox"/> 2 People.....	\$76,500	<input type="checkbox"/> 5 People	\$103,275	<input type="checkbox"/> 8 People	\$126,225
<input type="checkbox"/> 3 People.....	\$86,063	<input type="checkbox"/> 6 People	\$110,925		

3. HOME AND UTILITY INFORMATION

Utility Bill Information

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: _____

Does your home have attic access? No Yes

Does your home have a basement or crawlspace? No Yes

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.

4. SIGNATURE (REQUIRED)

By my signature below, I attest that 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 and (b) submit a Proposal to implement retrofits prioritized for energy savings for approval by me and the PSR Coordinator.

*Signature: _____ Date: _____

I understand that in order to participate in the PSR program, I need to be enrolled in the Green Homes Challenge program.

- I would like DEE staff to sign me up for the Green Homes Challenge and track my PSR improvements.
- I have/will sign myself up for the Green Homes Challenge and have/will complete at least one action.

Register Here: <http://www.frederickgreenchallenge.org/>

5. CURRENT HOME CONCERNS

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"/> Other: _____
<input type="checkbox"/> Old/problematic water heater	

Checklist for Application for Services for the Power Saver Retrofits Program

Completed and Signed Application (Pages 1 and 2)

Completed and Signed Homeowner Agreement and Release of Liability

Proof of Gross Household Income - Supporting Documents

Option A: Provide a copy of pages 1-2 of the previous year's federal income tax return for each adult residing in the home

Option B: Provide Statement of Benefits or Financial Assistance for each adult (Social Security, Unemployment, Section 8, etc.)

Option C: Provide 4 most recent pay stubs for each adult residing in the home

Submit your application

Option A: In-Person Appointment. Contact Lindsey Humphrey.

Option B: Email, Fax or Mail application and supporting documents to Lindsey Humphrey.

Email: LHumphrey@FrederickCountyMD.gov **Fax:** 301.600.2054 **Phone:** 240.772.0390

Mail: Lindsey Humphrey, Division of Energy & Environment, 30 N. Market St., Frederick, MD 21701

****We'll contact you about program acceptance***

Things to Know:

1. Homes may have health and safety issues that make the home ineligible for PSR unless fixed in a timely manner prior to energy efficiency upgrades. There is a set amount of PSR funds which 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 allowed. If repairs exceed amount allowed and I still want to participate in PSR, I understand that I will be responsible for repair costs over the amount. I understand that if health and safety repairs cannot be (a) rectified by PSR and I cannot pay more for repairs, or (b) completed within 3 weeks of their identification, I may become ineligible for PSR.
2. The following are **NOT INCLUDED** in the PSR Program:
 - a. Window improvements or replacements (unless a broken window meets health and safety repair criteria)
 - b. Replacement of stoves or ovens
 - c. Replacement of a stand-alone furnace or air conditioning unit, without other energy efficiency measures
 - d. Duct work additions or replacements except as needed to install upgraded equipment.
3. If selected as a participant in PSR, there is no cost or fee to participate and that DCE **will pay only for** recommended eligible projects that will result in energy savings over a 15-year period that are equal or greater than the total cost of the improvements (total cost of energy improvements/estimated annual utility bill savings = 15 or less).

DEMOGRAPHIC INFORMATION

How would you describe your military status?

Active Military Veteran Neither

How would you describe your Ethnicity? (Check next to all that apply)

Ethnic Origin: American Indian/Alaska Native Asian Black/African American Hispanic/Latino
 Native Hawaiian/Other Pacific Islander White/Caucasian Two or more races

How did you hear about the Power Saver Retrofits Program? _____

If you would like to optout from answering these questions, please initial here _____

The demographic information you provide is important and **voluntary**. It will allow us to ensure we are serving all Frederick County residents equitably. This section is confidential and will remain separate from the rest of the application.

Please note: this information is not used to determine eligibility for the program.

Frederick County 2023 Power Saver Retrofits

Homeowner Agreement and Release of Liability

I, _____ (print name), hereby agree to participate, if selected, in Frederick County's Power Saver Retrofits (PSR) Program coordinated by the Frederick County Department of Climate and Energy (DCE).

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.

I understand that 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. I understand that DCE and I will both approve the PSR Contractor's proposed project list, costs, and contract before the work is undertaken. I understand that DCE 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).

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.

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 DCE and, if requested, the Maryland Energy Administration. I agree to respond to a post-retrofit survey regarding my experience.

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.

I By my/our signature(s) below, I/we confirm that I/we am/are at least 18 years of age or older and that I/we are owners of the property at the address below. By my/our signature(s) below, I/we recognize that Frederick County, Maryland, its employees and agents, have not undertaken any duty or responsibility for damages that may occur as a result of work performed under the PSR. I/We acknowledge that the PSR contractor is an independent contractor and is not an agent or employee of Frederick County for the purposes of this Agreement. I/We hereby agree to release, defend, and hold Frederick County, its employees and agents, harmless for any claims of any type related to the work under the PSR, or arising out of or related in any way (either in whole or in part) to participation in PSR.

Homeowner Signature Block: **(REQUIRED)**

Signed: _____ Date: _____

FULL printed name: _____ Phone: _____

Email: _____

Co-Owner Signature Block: **(REQUIRED, IF APPLICABLE)**

Signed: _____ Date: _____

FULL printed name: _____