



## ENERGY EFFICIENCY FINANCIAL INCENTIVES FOR RESIDENTIAL CUSTOMERS

The following information is provided as part of the PowerSavers conservation program to encourage residential customers to select and install energy efficient equipment for their facilities. This program is a joint offering from participating utilities of the Minnkota Power Cooperative (MPC) and the Northern Municipal Power Agency (NMPA).

### Instructions for Use:

*For complete instructions, please refer to the Terms and Conditions, on page 6.*

**Step 1: Determine Eligibility:** Equipment must be new and installed in a residence served by one of the participating municipal or cooperative utilities listed below. Please check your utility:

<input type="checkbox"/> Bagley Public Utilities	<input type="checkbox"/> Hawley Public Utilities	<input type="checkbox"/> Roseau Municipal Utilities
<input type="checkbox"/> Baudette Municipal Utilities	<input type="checkbox"/> North Star Electric Cooperative	<input type="checkbox"/> Stephen Municipal Utilities
<input type="checkbox"/> Beltrami Electric Cooperative	<input type="checkbox"/> PKM Electric Cooperative	<input type="checkbox"/> Thief River Falls Municipal Utilities
<input type="checkbox"/> Clearwater-Polk Electric Cooperative	<input type="checkbox"/> Red Lake Electric Cooperative	<input type="checkbox"/> Warren Municipal Utilities
<input type="checkbox"/> Fosston Municipal Utilities	<input type="checkbox"/> Red River Valley Cooperative Power Association	<input type="checkbox"/> Wild Rice Electric Cooperative
<input type="checkbox"/> Halstad Municipal Utilities	<input type="checkbox"/> Roseau Electric Cooperative	

**Step 2: Install Equipment.** New equipment must be installed and old equipment removed. Only new products which are exact product types listed in this form are eligible for prescriptive incentives. If the potential incentive is greater than \$5,000 contact the utility to get pre-approval.

**Step 3: Complete and sign the application.** Forms must be received within 60 days of installation. Incomplete applications will cause delays in payment.

**Step 4: Mail completed application and a copy of the itemized invoice to your participating utility, listed on page 2 of this form.**

## PARTICIPATING COOPERATIVE UTILITIES

### **Beltrami Electric Cooperative**

P.O. Box 488  
Bemidji, MN 56619-0488  
(218) 444-2540 or 1-800-955-6083, (218) 444-3676 (fax)

### **Clearwater-Polk Electric Cooperative**

315 N. Main Ave.  
Bagley, MN 56621  
(218) 694-6241 or 1-888-694-3833, (218) 694-6245 (fax)

### **North Star Electric Cooperative**

441 Street Hwy. 172 N.W.  
P.O. Box 719  
Baudette, MN 56623-0719  
(218) 634-2202 or 1-888-634-2202, (218) 634-2203 (fax)

### **PKM Electric Cooperative**

406 N. Minnesota Street  
Warren, MN 56762  
(218) 745-4711 or 1-800-552-7366, (218) 745-4713 (fax)

### **Red Lake Electric Cooperative**

P.O. Box 430  
Red Lake Falls, MN 56750-0430  
(218) 253-2168 or 1-800-245-6068, (218) 253-2630 (fax)

### **Red River Valley Cooperative Power Association**

P.O. Box 358  
Halstad, MN 56548-0358  
(218) 456-2139 or 1-800-788-7784, (218) 456-2102 (fax)

### **Roseau Electric Cooperative**

1107 Third Street N.E.  
Roseau, MN 56751  
(218) 463-1543 or 1-888-847-8840, (218) 463-3713 (fax)

### **Wild Rice Electric Cooperative**

P.O. Box 438  
Mahnomon, MN 56557-0438  
(218) 935-2517 or 1-800-244-5709, (218) 935-2519 (fax)

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## PARTICIPATING MUNICIPAL UTILITIES

### **Bagley Public Utilities**

P.O. Box M  
Bagley, MN 56621  
(218) 694-2300, (218) 694-6623 (fax)

### **Baudette Municipal Utilities**

P.O. Box 548  
Baudette, MN 56623  
(218) 634-2432, (218) 634-9777 (fax)

### **Fosston Municipal Utilities**

220 East 1<sup>st</sup> Street  
Fosston, MN 56542  
(218) 435-1737, (218) 435-1961 (fax)

### **Halstad Municipal Utilities**

405 2<sup>nd</sup> Ave. West  
Halstad, MN 56548  
(218) 456-2128, (218) 456-2018 (fax)

### **Hawley Public Utilities**

P.O. Box 69  
Hawley, MN 56549  
(218) 483-3331, (218) 483-3332 (fax)

### **Roseau Municipal Utilities**

1198 Center Street West  
Roseau, MN 56751  
(218) 463-2351, (218) 463-1231 (fax)

### **Stephen Municipal Utilities**

P.O. Box 630  
Stephen, MN 56757  
(218) 478-3614, (218) 478-3806 (fax)

### **Thief River Falls Municipal Utilities**

P.O. Box 528  
Thief River Falls, MN 56701  
(218) 681-5816, (218) 681-8225 (fax)

### **Warren Municipal Utilities**

120 East Bridge Ave.  
Warren, MN 56762  
(218) 745-5343, (218) 745-5344 (fax)

# Residential Prescriptive Form



Customer Information (Please Print)				
Name of Homeowner		Contact Phone		Contact Mobile
Mailing Address		City		State
Installation Address		City		ZIP Code
Email Address				
Electric Utility Name: _____ Account Number _____		Gas Utility Name: _____ Account Number _____		Building Type <input type="checkbox"/> Existing <input type="checkbox"/> New Construction
Building Use <input type="checkbox"/> Single Family <input type="checkbox"/> Multi-family How many units? _____				
Fuel Type for Space Heating: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____				
Fuel Type for Water Heating: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____				
How did you learn about the program? <input type="checkbox"/> My Utility <input type="checkbox"/> Utility Web site <input type="checkbox"/> Newspaper <input type="checkbox"/> Community Event <input type="checkbox"/> Mail/Bill Insert <input type="checkbox"/> Contractor <input type="checkbox"/> Other: _____				
Contractor Information				
Name of Installing Contractor (if applicable)		Contact Phone		Contact Mobile
Contractor Address		City		State
ZIP				
Equipment Information				
A. Lighting Equipment				
Equipment Type	Specifications	Incentive	Quantity	Total
CFL Lamps-\$2 per bulb	Replace incandescent bulbs with ENERGY STAR® Compact Fluorescent Lamps (CFLs). Maximum 12 CFLs per customer.	\$2/bulb		
B. Appliances				
Equipment Type	Specifications	Incentive	Quantity	Total
Clothes Washer	ENERGY STAR®	\$50/Unit		
Brand Installed	Model Number Installed	Serial Number Installed		
Clothes Dryer Fuel Source: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> LP (Propane) <input type="checkbox"/> Oil <input type="checkbox"/> Other _____				
C. Domestic Hot Water Measures				
Equipment Type	Specification	Incentive	Quantity	Total
Electric Water Heater	Minimum 80 gallon total capacity, EF ≥0.91. Must be controlled under the utility's load management program	\$150/Unit		
Brand Installed	Model Number Installed	Serial Number Installed		
Equipment Replaced <input type="checkbox"/> Electric Water Heater <input type="checkbox"/> Natural Gas Water Heater <input type="checkbox"/> LP Water Heater <input type="checkbox"/> Other: _____				

**D. Heating, Ventilation Air Conditioning Measures<sup>1</sup>**

Equipment Type	Specifications	AHRI/GAMA Reference	Incentive/Unit	Quantity	Total
Supplemental Heating Source for Air-Source Heat Pump (ASHP)	Must modulate to allow ENERGY STAR-rated ASHP to operate down to 5°F, and be on load control		\$500		
Air-Source Heat Pump <sup>3</sup>	14.0 SEER, 8.2 HSPF		\$250		
Furnace (Air Handler) with ECM blower <sup>2, 7, 8</sup>	Furnace with an ECM blower		\$150		
Mini Split/Ductless Air-Source Heat Pump <sup>4</sup>	15 SEER		\$500		
<i>Information must be listed for the indoor, outdoor and furnace unit, unless an AHRI certificate can be produced without the furnace unit information:</i>					
Furnace Manufacturer:		Model Number(s) Installed:	Serial Number(s) Installed:		
Outdoor Unit Air Source Heat Pump Manufacturer:		Model Number(s) Installed:	Serial Number(s) Installed:		
Indoor Unit Air Source Heat Pump Manufacturer:		Model Number(s) Installed:	Serial Number(s) Installed:		
Equipment Removed: <input type="checkbox"/> Heat Pump <input type="checkbox"/> Electric Furnace <input type="checkbox"/> Natural Gas Furnace <input type="checkbox"/> LP Furnace <input type="checkbox"/> Other:					

**E. Geothermal Measures<sup>1, 5, 6, 9</sup>**  
 If equipped with backup electric heat, home must be on load control or demand billing per local utility offerings

Equipment Type	Specifications	AHRI Reference	Incentive/Ton	Quantity	Total
Ground-Source Heat Pump Open Loop	16.2 EER/3.6 COP Maximum incentive \$2,500/home		\$200/ton		
Ground-Source Heat Pump Closed Loop	14.1 EER/3.3 COP Maximum incentive \$5,000/home		\$400/ton		
Manufacturer	Model Number	Serial Number			
Manufacturer	Model Number	Serial Number			
Design Temperature used for analysis:	Resulting Heat Loss:	Equipment Heating Capacity Required for Home:			
System Provides: <input type="checkbox"/> Cooling <input type="checkbox"/> Heating		Type of Geothermal System: <input type="checkbox"/> Water-to-water <input type="checkbox"/> Water-to-air			

**Requirements**

- Must be installed by qualified, insured contractor. New installations only. Must be the primary heating source for the home and be on a list of prequalified units. All efficiency ratings will be verified using the AHRI database (ahridirectory.org).
- New furnace/indoor unit installations only. Unit must be equipped with an electronically commutated motor (ECM) as original equipment in the furnace, heat pump or indoor blower. Must be the primary heating source for the home.
- Qualifying units are standard split system, furnace integrated for homes with ductwork. Electricity must be a primary heating source in your new or existing home. Unit must be on a list of prequalified units. Units must be labeled as ENERGY STAR® qualified (current listing) or include proof of the following ratings: split-system installations must be rated with a minimum SEER of 14.0, a HSPF of 8.2, considering the evaporator coil, condenser coil and furnace. The furnace and condenser model and serial numbers, evaporator model and serial number, and AHRI reference number are required for all installations. All efficiency ratings will be verified using the AHRI database (ahridirectory.org) or manufacturer specifications.
- Unit must be rated with a minimum SEER of 15.0 and be on a list of prequalified units. AHRI reference number are required for all installations. All efficiency ratings will be verified using the AHRI database (ahridirectory.org).
- Geothermal incentives require a heat load calculation to be submitted with the incentive application. Incentive is based off total heating capacity for the home.
- Water-to-water systems need the manufacturer's specifications indicating the equipment meets incentive requirements.
- Indoor units that contain ECM motors which include, fuel-fired furnaces or air handlers with no secondary heating source, also qualify.
- Indoor units that contain ECM motors with system ratings less than 14.0 SEER, 8.2 HSPF, would qualify under the \$150 furnace incentive.
- Units must meet or exceed above efficiency levels or carry an Energy Star qualification. Multi-stage units may be qualified based on the following:  

$$EER = (\text{highest rated capacity EER} + \text{lowest rated capacity EER}) / 2$$

$$COP = (\text{highest rated capacity COP} + \text{lowest rated capacity COP}) / 2$$

F. Replacement Ground-Source Heat Pump					
Equipment Type	Specifications	AHRI Reference	Incentive/Ton	Quantity	Total
Replacement Ground-Source Heat Pump Open Loop <135,000 BTUH @ 59°F	16.2 EER/3.6 COP Maximum incentive \$1,250/home		\$100/ton		
Replacement Ground-Source Heat Pump Closed Loop <135,000 BTUH @ 77°F	14.1 EER/3.3 COP Maximum incentive \$2,500/home		\$200/ton		
Manufacturer	Model Number	Serial Number			
Design Temperature used for analysis:	Resulting Heat Loss:	Equipment Heating Capacity Required for Home:			
System Provides: <input type="checkbox"/> Cooling <input type="checkbox"/> Heating		Type of Geothermal System: <input type="checkbox"/> Water-to-water <input type="checkbox"/> Water-to-air			

### Requirements

1. Incentive available for failed Geothermal equipment only.
2. Entire indoor unit replacement is required to receive incentive. Replacing only the compressor will not qualify for the incentive.
3. Equipment must meet or exceed efficiency requirements as stated above.
4. Equipment being replaced must fall outside of any warranty period to receive incentive. Invoice showing proof of purchase must be attached.
5. If equipped with backup electric heat, building must be on load control or demand billing per local utility offering.
6. Heat load calculation required with all replacement applications submitted clearly delineating a) design temperature used for analysis b) resulting heat loss, c) equipment heating capacity required for building.

Summary of Incentives						
A. Subtotal	B. Subtotal	C. Subtotal	D. Subtotal	E. Subtotal	F. Subtotal	Total Incentives
\$	\$	\$	\$	\$	\$	\$

### Certifications and Signature

I hereby certify that: 1. The information contained in this application is accurate and complete; 2. All installation is complete and the unit(s) is operational prior to submitting application; and 3. All rules of this incentive program have been followed. 4. I have read and understand the terms and conditions included with this document.

I agree to verification of equipment installation, which may include a site inspection by a program or utility representative. I understand that I am not allowed to receive more than one incentive from this program on any piece of equipment. I hereby agree to indemnify, hold harmless and release the utility from any actions or claims in regard to the installation, operation and disposal of equipment (and related materials) covered herein, including liability from any incidental or consequential damages.

Customer Signature	Print Name	Date Equipment Installed:
		Date Submitted:

### Program Use Only

Date Received:	Post Inspected? <input type="checkbox"/> Yes <input type="checkbox"/> No	Incentive Approved <input type="checkbox"/> Yes <input type="checkbox"/> No Amount: \$	Date Approved:
Utility or Program Representative:			
Joint Program Tracking #			

## Terms and Conditions

1. **Incentive Offer:** Projects must be implemented (completed) by **December 31, 2010**. An original signed application and invoices for materials and labor must be delivered to the participating utility at the address located on page 2 of this application **within 60 calendar days of installation (completion)**. Please keep a copy for your records.
2. **Proof of Purchase:** This application must have complete information and be submitted with an invoice itemizing the **new equipment purchased**. The manufacturer (OEM) specification sheet(s) are needed only if an AHRI certificate is not available. The invoice must indicate date of purchase, size, type, make, model and total project cost.
3. **Compliance:**
  - a. All projects are expected to comply with federal, state, and local codes.
  - b. All equipment must be new or retrofitted with new components per the program specifications. Used or rebuilt equipment is not eligible for incentives. Existing equipment must be removed or permanently disconnected.
  - c. Equipment must meet specification requirements and be purchased and operating prior to submitting an incentive application.
  - d. Customers may only receive one incentive per piece of qualifying equipment.
  - e. If the project is in a leased building, the term of the lease must be at least five (5) years.
4. **Payment:** Once completed paperwork is submitted, incentive payments are usually made within 45 calendar days. Incomplete applications will either delay payments or be denied. The participating utilities reserve the right to refuse payment and participation if the customer or contractor violates program rules and procedures. All projects exceeding \$5,000 in incentives will be inspected prior to incentive payment.
5. **Inspection:** Program staff may conduct an inspection of the facility to survey installed projects.
6. **Publicity:** The participating utilities reserve the right to publicize your participation in this program, unless you specifically request otherwise.
7. **Program Discretion:** Incentives are available on a first-come, first-served basis. This incentive is subject to change or termination without notice at the discretion of the participating utilities.
8. **Logo Use:** Customers or allies may not use the participating utilities' name or logo in any marketing, advertising, or promotional material without written permission.
9. **Disclaimers:** The participating utilities
  - a. Do not endorse any particular manufacturer, product, labor or system design by offering these programs;
  - b. Will not be responsible for any tax liability imposed on the customer as a result of the payment of incentives;
  - c. Do not expressly or implicitly warrant the performance of installed equipment or contractor's quality of work (contact your contractor for detailed warranties);
  - d. Is not responsible for the proper disposal/recycling of any waste generated as a result of this project;
  - e. Is not liable for any damage caused by the installation of the equipment or for any damage caused by the malfunction of the installed equipment.

### **INCENTIVE LIMIT:**

Total incentives paid are limited to \$10,000 per customer per year for equipment installed in the same calendar year. An incentive exceeding \$5,000 must receive written approval BEFORE project installation. Total incentive not to exceed 75 percent of the project cost. If self installed, incentives for measures can be up to the purchase price of a specific measures but shall not exceed the incentives set by Minnkota Power Cooperative, Inc. and the Northern Municipal for each measure.

### **ELIGIBILITY:**

These incentives are offered by member utilities of the Minnkota Power Cooperative, Inc. and the Northern Municipal Power Agency. For questions regarding eligibility, call your local utility listed on page 2.